< Our Collaborations

EXHIBIT

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HEALTH PROFESSION SERVICES

In addition to collaborating with the Federation of State Medical Boards (FSMB) to co-sponsor the USMLE®, NBME works with a number of other health profession organizations, providing assessment and consultative services to meet their needs.



How We Work

Whether it's helping develop and deliver an in-training exam or providing expert consultation for specialized projects related to medical education, testing, and research, NBME welcomes the opportunity to collaborate with organizations that serve health professionals on their educational journey.

We draw on our expertise in test development and psychometrics to provide services to medical specialty boards and societies, and allied health professional organizations throughout the United States.

Our Services

Learn more about the services provided by NBME and view a full list of our collaborators below.



TEST DEVELOPMENT

We provide test development services to help organizations plan and develop the appropriate content for their exam.



SCORING & PSYCHOMETRICS

We provide comprehensive support for the psychometric, technical data analysis, and reporting needs of each client.



TEST DELIVERY

Our test delivery capabilities assist organizations in selecting and setting up the ideal delivery method for their exam.



RESEARCH AND CONSULTATION

Our research specialists offer support for organizations with unique measurement concerns or questions that require focused investigation or experimentation.



EXAMINEE SUPPORT SERVICES

Examinee Support Services provides support for examinees throughout the test registration and administration process.



EDUCATIONAL SERVICES

We offer consultative services for educators and item writers, including workshops focused on multiple-choice question writing and psychometrics.

Our Collaborators

NBME works with the <u>Federation of State Medical Boards (FSMB)</u> to co-sponsor the USMLE and the <u>National Board for Health & Wellness Coaching (NBHWC)</u> to develop the <u>Health & Wellness Coaching (Certifying Examination</u>.





Other Organizations that Work with NBME

Click the links below to learn more about other organizations that currently work with NBME.

American Association of Medical Assistants (AAMA) (American Board of Medical Genetics and Genomics (ABMGG) (ABMGG)

American Board of Neurological Surgery (ABNS) American Board of Physical Therapy Specialties

(ABPTS)

American College of Cardiology (ACC)

American College of Physicians® (ACP®)

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2022 FSMB BYLAWS



ARTICLE I. NAME

The corporation shall be known as the Federation of State Medical Boards of the United States, Inc. ("FSMB").

ARTICLE II. CLASSES OF MEMBERSHIP, ELECTION AND MEMBERSHIP RIGHTS

SECTION A. MEMBER MEDICAL BOARDS

The term "Member Medical Board" as used in the Articles of Incorporation and in these Bylaws shall refer to any board, committee or other group in any state, territory, the District of Columbia or possession of the United States of America that is empowered by law to pass on the qualifications of applicants for licensure to practice allopathic or osteopathic medicine or to discipline such licensees. If a state or other jurisdiction has more than one such entity and if each is an independent agency unrelated to the others, each is eligible for membership. Any eligible Medical Board may become a Member Medical Board upon approval of its application by the Board of Directors.

SECTION B. FELLOWS

There shall be two categories of Fellow of the FSMB:

- 1. Board Member Fellow. A Board Member Fellow is an individual member who as a result of appointment or confirmation is designated to be a member of a Member Medical Board. A Board Member Fellow shall be a Fellow of the FSMB during the member's period of service on a Member Medical Board, and for a period of thirty-six months thereafter, and
- 2. STAFF FELLOW. A Staff Fellow is an individual hired or appointed and who is responsible for the day-to-day supervision and performance of the administrative duties and functions for which a medical board is responsible. Each member board may denote only one individual to serve as a Staff Fellow of the FSMB. No individual shall continue as a Staff Fellow upon termination of employment by or service to the Member Medical Board.

SECTION C. HONORARY FELLOWS

A Board Member Fellow as defined in Section B, paragraph 1 shall become an Honorary Fellow of the FSMB thirty-six months after completion of service on a Member Medical Board. A Staff Fellow as defined in Section B, paragraph 2 shall become an Honorary Fellow of the FSMB upon

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termination of employment by or service to the Member Medical Board. An Honorary Fellow of the

FSMB may be appointed by the Chair to serve as a member of any committee or in any other

appointive capacity.

SECTION D. ASSOCIATE MEMBERS

A Member Medical Board may designate one or more employees or staff members, other than an

individual designated as a Staff Fellow, to be an Associate Member of the FSMB. No individual

shall continue as an Associate Member upon termination of employment by or service to the

Member Medical Board.

SECTION E. AFFILIATE MEMBERS BOARDS

A board or authority that is not otherwise eligible for membership may become an Affiliate Member

Board of the FSMB upon approval of its application by the Board of Directors if the board or

authority licenses either:

1. Allopathic or osteopathic physicians or physician assistants in the United States; or

2. Allopathic or osteopathic physicians if the board or authority is located in another country.

SECTION F. OFFICIAL OBSERVERS

An organization may apply for Official Observer status at meetings of the House of Delegates. The

Board of Directors shall prescribe rules and procedures to govern the application for, the granting

of and the exercise of Official Observer status.

SECTION G. RIGHTS OF MEMBERS

Except as otherwise provided in these Bylaws, rights, duties, privileges and obligations of a

member of the FSMB may be exercised only by a Member Medical Board.

SECTION H. METHODS OF NOMINATION TO ELECTED OFFICE

Nomination by the Nominating Committee or Nomination by Petition pursuant to Articles III, IV, V

and VIII shall be the sole methods of nomination to an elected office of the FSMB. A candidate

who runs for and is not elected to an elected office shall be ineligible to be nominated for any other

elected office during the same election cycle.

ARTICLE III. OFFICERS: ELECTION AND DUTIES

SECTION A. OFFICERS OF THE FSMB

1. OFFICERS. The officers of the FSMB shall be that of Chair, Chair-elect, Immediate Past Chair,

Treasurer and Secretary.

- 2. Only an individual who is a Fellow as defined in Article II, Section B, paragraph 1 at the time of the individual's election or appointment shall be eligible for election or appointment as an Officer of the FSMB, except for the position of Secretary.
- 3. The position of Secretary shall be an ex-officio office, without vote, and the President of the FSMB shall serve as Secretary.

SECTION B. ELECTION OF OFFICERS

- 1. The Chair-elect shall ascend to the position of Chair at the Annual Meeting following the meeting in which the Chair-elect was elected.
- 2. The Chair-elect shall be elected at each Annual Meeting of the House of Delegates.
- 3. The Immediate Past Chair assumes that position upon the Chair-elect ascending to the position of Chair.
- 4. The Treasurer shall be elected every third year at the Annual Meeting of the House of Delegates.
- 5. Officers shall be elected by a majority of the members of the House of Delegates present and voting.
- 6. In any election, should no candidate receive a majority of the votes cast, a runoff election shall be held between the two candidates who receive the most votes for that office on the first ballot. Up to two additional runoff elections shall be held.
- 7. Prior to each election, the presiding officer shall cast a sealed vote that shall be counted only to resolve a tie that cannot be decided by the process set forth in this section.

SECTION C. DUTIES OF OFFICERS

- 1. The duties of the Chair shall be as follows:
 - a. Preside at all meetings and sessions of the House of Delegates and the Board of Directors;
 - b. Perform the duties customary to the office of the Chair;
 - Make appointments to committees and define duties of committee members in accordance with these Bylaws, except as otherwise provided herein;
 - d. Serve, ex officio, on all committees except as otherwise provided herein; and
 - e. Exercise such other rights and customs as the Bylaws and parliamentary usage may

require or as the FSMB or the Board of Directors shall deem appropriate.

- 2. The duties of the Chair-elect shall be as follows:
 - a. Assist the Chair in the discharge of the Chair's duties; and
 - <u>b.</u> Perform the duties of the Chair at the Chair's request or, in the event of the Chair's temporary absence or incapacitation, at the request of the Board of Directors.
- 3. The duties of the Immediate Past Chair shall be as follows:
 - a. Assist the Chair in the transition from Chair-elect to Chair;
 - <u>b.</u> Serve as chair of the Nominating Committee; and
 - <u>c.</u> Perform such other duties and responsibilities as the Chair shall determine.
- 4. The duties of the Treasurer shall be as follows:
 - a. Perform the duties customary to that office;
 - <u>b.</u> Perform such other duties as the Bylaws and custom and parliamentary usage may require or as the Board of Directors shall deem appropriate;
 - c. Serve as an ex officio member of the Audit Committee; and
 - d. Serve as chair of the Finance Committee.
- 5. The duties of the Secretary shall be as follows:
 - a. Administer the affairs of the FSMB; and
 - b. Such duties and responsibilities as the FSMB and the Board of Directors shall determine.

SECTION D. TERMS OF OFFICE AND SUCCESSION

- 1. The Chair and Chair-elect shall serve for single terms of one year or until their successors assume office.
- 2. The Immediate Past Chair shall serve until a successor to the current Chair assumes office.
- 3. The Treasurer shall serve for a single term of three years or until the Treasurer's successor assumes the office.
- 4. Officers shall assume office upon final adjournment of the Annual Meeting of the House of Delegates at which they were elected.
- 5. The term of the Secretary is co-terminus with that of the President.

SECTION E. VACANCIES

- In the event of a vacancy in the office of the Chair, the Chair-elect shall assume the position of Chair for the remainder of the unexpired term, and shall then serve a full one-year term as Chair.
- 2. In the event of a vacancy in the office of the Chair-elect, the Board of Directors shall appoint a Director-at-Large to assume the duties, but not the office, of Chair-elect for the remainder of the unexpired term. At the next Annual Meeting of the House of Delegates, both a Chair and a Chair-elect shall be elected in accordance with the provisions in Section B of this Article.
- 3. In the event of a vacancy in the office of Immediate Past Chair, the office shall remain open until a new Chair assumes the office.
- 4. In the event of a vacancy in the office of the Treasurer, the Board of Directors shall elect one of the Directors-at-Large to serve as Treasurer, with one vote on the Board of Directors and one vote on the Executive Committee, until the next year's Annual Meeting of the House of Delegates, at which time a Treasurer shall be elected.

ARTICLE IV. BOARD OF DIRECTORS

SECTION A. MEMBERSHIP AND TERMS

- 1. Membership: The Board of Directors shall be composed of the Officers, nine Directors-at-Large and two Staff Fellows. At least three members of the Board, who are not Staff Fellows, shall be non-physicians, at least two of whom shall be a Member Medical Board public member.
- 2. Nomination of Staff Fellows: Nominations for Staff Fellow positions shall be accepted from Member Boards, the Board of Directors and the Administrators in Medicine. Staff Fellows shall be appointed by the Board of Directors in staggered terms in accordance with policies and procedures established by the Board of Directors.
- 3. TERMS: Directors-at-Large shall each serve for a term of three years and shall be eligible to be reelected to one additional term. Staff Fellows shall serve for a term of two years and shall be eligible to be reappointed to one additional term. A partial term totaling one-and-a-half years or more shall count as a full term.

SECTION B. NOMINATIONS

1. The Nominating Committee shall submit a roster of one or more candidates for each of the offices and positions to be filled by election at the Annual Meeting of the House of Delegates.

2. The Nominating Committee shall mail its roster of candidates to Member Boards not fewer than sixty days prior to the Annual Meeting of the House of Delegates.

SECTION C. ELECTION OF DIRECTORS-AT-LARGE

- 1. At least three of the Directors-at-Large shall be elected each year at the Annual Meeting of the House of Delegates by a majority of the votes cast.
- If no candidate receives a majority of the votes on the first ballot, and one seat is to be filled, a runoff election shall be held between the two candidates who received the most votes on the first ballot.
- 3. If more than one seat is to be filled from a single list of candidates, and if one or more seats are not filled by majority vote on the first ballot, a runoff election shall be held, with the ballot listing candidates equal in number to twice the number of seats remaining to be filled. These candidates shall be those remaining who received the most votes on the first ballot. The same procedure shall be used for any required subsequent runoff elections. In the event of a tie vote in a runoff election up to two additional runoff elections shall be held.
- 4. Prior to the election, the presiding officer shall cast a sealed vote, ranking each candidate in a list. The presiding officer's vote is counted for the candidate in the runoff election who is highest on the list. The presiding officer's vote is counted only to resolve a tie that cannot be decided by the process set forth in this section.
- 5. Directors shall assume office upon final adjournment of the Annual Meeting of the House of Delegates at which they were elected.
- 6. Only an individual who is a Board Member Fellow at the time of the individual's election shall be eligible for election as a Director of the FSMB.

SECTION D. DUTIES OF THE BOARD OF DIRECTORS

- 1. The control and administration of the FSMB is vested in the Board of Directors and it shall act for the FSMB between Annual Meetings.
- 2. The Board of Directors shall carry out the mandates of the FSMB as established by the House of Delegates, and it shall have full and complete authority to perform all acts and to transact all business for and on behalf of the FSMB.
- 3. The Board of Directors shall conduct and manage all property, affairs, work and activities of the FSMB, subject only to the provisions of the Articles of Incorporation and these Bylaws

and to resolutions and enactments of the House of Delegates.

- 4. The Board of Directors shall be the fiscal agent of the FSMB.
- 5. The Board of Directors shall establish rules for its operations and meetings.
- 6. The FSMB shall indemnify Directors, Officers and other individuals acting on behalf of the FSMB if such indemnification is in accordance with the laws of the State of Nebraska and the operational policies and procedures of the Board of Directors, as adopted. The Board shall report to the membership of the FSMB at the Annual Meeting of the House of Delegates.
- 7. The Board of Directors shall establish a strategic plan for the FSMB that states the FSMB mission and objectives and shall submit that plan to the House of Delegates for ratification, modification or rejection. The Board shall review the current strategic plan annually and propose any amendments to the Annual Meeting of the House of Delegates for ratification, modification or rejection. The President shall report to the Annual Meeting of the House of Delegates on the extent to which the FSMB's stated objectives have been accomplished in the preceding year.

SECTION E. REMOVAL FROM OFFICE

- Removal: Any officer or member of the Board of Directors may be removed for any cause deemed sufficient by an affirmative vote of two-thirds of the total members of the Board of Directors entitled to vote and who are not subject to removal from office.
- 2. PROCEDURE: The procedure for removal shall be as follows:
 - a. The Board shall file with the Secretary of the Board and deliver a written statement of the cause for removal to the officer or board member in sufficient detail as to state the grounds for the removal. Delivery to the officer or board member shall be by certified mail, return receipt requested, to the last address known to the Board.
 - b. The officer or board member shall deliver a sworn written response to the Board no later than thirty calendar days after the written statement of the cause for removal is delivered to the officer or board member in question. Delivery to the Board shall be by certified mail, return receipt requested, directed to the Secretary of the Board at the FSMB corporate office.
 - c. At the Board meeting following the date the response is due, the Board shall determine whether or not to proceed with removal. Notice of the Board's action shall be delivered to the officer or board member by certified mail, return receipt requested. If the officer or board FSMB 2022 Bylaws, page 7

member does not file a written response, the Board shall proceed with a determination.

- d. If the Board votes to proceed with removal of the officer or board member, at a Board meeting the board member shall be afforded the opportunity to address the Board on the merits of the allegations and produce any relevant information to the Board after which the Board shall make a determination. The Board meeting at which the officer or board member has the opportunity to address the Board shall be held no less than thirty days after delivery of the notice of removal.
- 3. APPEAL: Any officer or member of the Board of Directors removed by the Board of Directors may appeal to the House of Delegates at its next business meeting. The officer or member may be reinstated by a two-thirds vote of the House of Delegates.
- 4. Delivery: For the purposes of this section, "Delivery" is effective upon mailing.

SECTION F. VACANCIES

- 1. DIRECTORS-AT-LARGE: In the event of a vacancy in the membership of the Directors-at-Large, the Board of Directors may appoint a Fellow who meets the qualifications for the position to serve until the next annual meeting of the House of Delegates, at which time a Fellow shall be elected and shall serve the remainder of the unexpired term. In the event a Director-at-Large is elected to the office of Treasurer or Chair-elect, that vacancy shall be filled by an election at the same annual meeting of the House of Delegates.
- 2. STAFF FELLOWS: In the event of a vacancy of a Staff Fellow, the Board of Directors may appoint a substitute to complete the Staff Fellow's term in accordance with the policies established by the Board of Directors.

SECTION G. EXECUTIVE COMMITTEE OF THE BOARD

1. Membership: The Board of Directors shall establish an Executive Committee of the Board, which shall consist of the Chair as Chair, Chair-elect, Treasurer, Immediate Past Chair and three Directors-at-Large. The Directors-at-Large shall be elected for a one-year term by majority vote of the Directors-at-Large and the Staff Fellows serving on the Board of Directors at the first regular meeting of the Board following the annual meeting of the House of Delegates. In the event of a vacancy in a Director-at-Large position, the Directors-at-Large and the Staff Fellows serving on the Board, by majority vote, shall choose another Director-at-Large to serve the remainder of the one-year term. A Staff Fellow may serve in one of the Director-at-Large positions. No more than one Staff Fellow may serve on the Executive Committee at

- any one time. In the event of vacancy in the position of Immediate Past Chair, this position shall remain vacant until the next annual meeting of the House of Delegates.
- 2. Duties: In intervals between Board meetings, the Executive Committee shall act for and on behalf of the Board in any matters that require prompt attention. It shall not modify actions previously taken by the Board unless additional information or a change of circumstances is presented and warrants additional action.
- 3. MEETINGS: The Executive Committee may meet as often as it deems necessary or appropriate, either in person, telephonically, electronically or by unanimous written consent, and at such times and places and manner as the Chair may determine. Minutes must be kept of all meetings.
- 4. Reporting: The Executive Committee shall report in writing all formal actions taken by it to the Board of Directors within five working days of taking those actions. At each meeting of the Board, the Executive Committee shall present to the Board a written report of all its formal actions since the previous meeting of the Board.

SECTION H. PUBLIC POLICY STATEMENTS

A "public policy" is defined as the official public position of the FSMB on a matter that may be reasonably expected to affect Member Boards when dealing with their licensees, other health care providers, health-related special interest groups, governmental bodies or the public. The House of Delegates is the official public policy-making body of the FSMB. When the interests of the FSMB require more immediate action, the Board of Directors, or the President in consultation with the Chair, if feasible, is authorized to issue statements on matters of public policy between Annual Meetings.

ARTICLE V. NOMINATION BY PETITION FOR BOARD OF DIRECTORS AND NOMINATING COMMITTEE

SECTION A. SUBMISSION OF A PETITION

- 1. At the time the Nominating Committee's roster of candidates is distributed to the Member Boards, the Boards will be informed that a Fellow who is qualified for nomination, but not otherwise nominated by the Nominating Committee, may seek to run for a position on the Board of Directors as an Officer or Director-at-Large, or for a position on the Nominating Committee.
- 2. In order to be placed on the ballot, the Fellow seeking nomination is required to present a

petition to Administrative Staff that is signed by at least one Fellow from at least four Member Boards as well as a fellow from the Board of the member seeking nomination.

3. The deadline to submit petitions to the Administrative Staff is twenty-one days prior to the Annual Meeting.

SECTION B. VALIDATION AND PLACEMENT ON BALLOT

- The Administrative Staff shall verify that all signatures on the petition are valid. "Valid" is defined as the person who is seeking nomination and the persons who signed the petition are Fellows as defined in the FSMB Bylaws.
- 2. Once verified, the petitions are deemed valid and the candidate is placed on the ballot.
- 3. The names of those seeking to run by petition whose petitions are deemed valid shall be distributed to the Voting Delegates not fewer than fourteen days prior to the Annual Meeting.
- 4. Once a candidate seeking to run by petition is added to the ballot, the candidate shall be afforded the same privileges and be bound by the same rules in the campaign process as candidates who were nominated by the Nominating Committee.

ARTICLE VI. PRESIDENT

The Board of Directors may, by a two-thirds majority vote of the full Board, appoint a President of the FSMB, who shall be a physician, to serve without term. The President shall administer the affairs of the FSMB and shall have such duties and responsibilities as the Board of Directors and the FSMB shall direct. The President shall serve as Secretary of the FSMB and shall be an exofficio member, without vote, of the Board of Directors.

ARTICLE VII. MEETINGS

SECTION A. ANNUAL MEETING OF THE HOUSE OF DELEGATES

The annual meeting of the House of Delegates of the FSMB, which shall be called the House of Delegates, shall be held at such time and place as may be fixed by the Board of Directors. Written notice of the time and place of the meeting shall be given to all Member Medical Boards by mail not fewer than ninety days prior to the date of the meeting. Notice is effective upon mailing.

SECTION B. SPECIAL MEETINGS OF THE HOUSE OF DELEGATES

Special meetings of the House of Delegates may be called at any time by the Chair, on the written request of ten Member Medical Boards or by action of the Board of Directors. Written notice of the

time and place of such meetings shall be given to all Member Medical Boards by mail not fewer than thirty days prior to the date of the meeting. Notice is effective upon mailing.

SECTION C. RIGHT TO VOTE

- 1. The right to vote at meetings of the House of Delegates is vested in, and restricted to, Member Medical Boards. Each Member Medical Board is entitled to one vote, said vote to be cast by the delegate of the Member Board. The delegate shall be the president of the Member Medical Board or the President's designated alternate. In order for a delegate to be permitted to vote, the delegate shall present a letter of appointment to the Secretary of the Board of Directors.
- 2. All classes of membership shall have the right of the floor at meetings of the House upon request of a delegate and approval of the presiding officer; however, the right to introduce resolutions is restricted to Member Medical Boards and the Board of Directors and the procedure for submission of such resolutions shall be in accordance with FSMB Policy.

SECTION D. QUORUM

A majority of Member Medical Boards shall constitute a quorum at any meeting of the House of Delegates. A majority of the voting members of the Board of Directors or any committee or other constituted group shall constitute a quorum of the Board, committee or group.

SECTION E. RULES OF ORDER

Meetings of the House of Delegates, Board of Directors and all committees shall be conducted in accordance with the *American Institute of Parliamentarians Standard Code of Parliamentary Procedure*, current edition, except when in conflict with the Articles of Incorporation or these Bylaws, in which case the Articles of Incorporation or these Bylaws shall prevail.

ARTICLE VIII. STANDING AND SPECIAL COMMITTEES

SECTION A. STANDING COMMITTEES

- 1. The Standing Committees of the FSMB shall be:
 - a. Audit Committee
 - b. Bylaws Committee
 - c. Education Committee
 - d. Ethics and Professionalism Committee
 - e. Finance Committee
 - f. Journal Oversight Committee

g. Nominating Committee

- 6. ADDITIONAL STANDING COMMITTEES. Additional standing committees may be created by resolution of the FSMB and/or amendment to the Bylaws. Chairs and members of all standing committees, with the exception of the Nominating Committee, shall be appointed by the Chair, with the approval of the Board of Directors, for a term of one year, unless otherwise provided for in these Bylaws. Reappointment, unless specifically prohibited, is permissible.
- 7. MEMBERSHIP. Honorary Fellows and Associate Members may be appointed by the Chair to serve on a standing committee in addition to the number of committeemembers called for in the following sections of this chapter. No more than one Honorary Fellow, Associate Member or non-member subject matter expert may be appointed by the Chair to serve in such a capacity on any standing committee unless otherwise provided for in these Bylaws. All committee members shall serve with vote. Honorary Fellows, Associate Members and non-members appointed to standing committees by the Chair shall serve for a term concurrent with the term of the Chair. No individual shall serve onmore than one standing committee except as specified in the Bylaws. With the exception of the Nominating Committee and the Journal Oversight Committee, the Chair and the Chair-elect shall serve, ex-officio, on all committees.
- 8. VACANCIES. In the event a vacancy occurs in an elected position on a standing committee, the Chair, with the approval of the Board of Directors, shall appoint a Fellow to serve on the committee until the next meeting of the House of Delegates, at which time an election will be held to fill the vacant position for the remainder of the unexpired term. In the event a vacancy occurs in an appointed position on a standing committee, the Chair, with the approval of the Board of Directors, shall appoint a Fellow to serve on the committee for the remainder of the unexpired term. In the event the Chairmanship of the Nominating Committee becomes vacant, the FSMB Chair, with the approval of the FSMB Board of Directors, shall appoint a Past Chair of the FSMB Board of Directors to serve in that capacity for the remainder of the unexpired term.

SECTION B. AUDIT COMMITTEE

The Audit Committee shall:

- 1. Be composed of five Fellows, three of whom shall be members of the Board of Directors. The Treasurer of the FSMB shall serve ex-officio without vote. The Chair of the FSMB shall appoint the Chair of the Audit Committee from one of the three sitting Board Members.
- 2. Ensure that an annual audit of the financial accounts and records of the FSMB is performed FSMB 2022 Bylaws, page 12

by an independent Certified Public Accounting firm.

- 3. Recommend to the Board of Directors the appointment, retention or termination of an independent auditor or auditors and develop a schedule for periodic solicitation of audit firms consistent with Board policies and best practices.
- 4. Oversee the independent auditors. The independent auditors shall report directly to the Committee.
- 5. Review the audit of the FSMB. Submit such audit and Committee's report to the Board of Directors.
- 6. Report any suggestions to the Board of Directors on fiscal policy to ensure the continuing financial strength of the FSMB.
- 7. When the finalized committee report to the Board of Directors is made, suggestions and feedback will be forwarded to the Finance Committee.

SECTION C. BYLAWS COMMITTEE

The Bylaws Committee, composed of five Fellows, shall continually assess the Articles of Incorporation and the Bylaws and shall receive all proposals for amendments thereto. It shall, from time to time, make recommendations to the House of Delegates for changes, deletions, modifications and interpretations thereto.

SECTION D. EDUCATION COMMITTEE

The Education Committee shall be composed of eight Fellows, to include the Chair as chair, the Immediate Past Chair and the Chair-elect. The Committee shall be responsible for assisting in the development of educational programs for the FSMB.

SECTION E. ETHICS AND PROFESSIONALISM COMMITTEE

The Ethics and Professionalism Committee shall be composed of up to eight Fellows and up to two subject matter experts. The Ethics and Professionalism Committee shall address ethical and professional issues pertinent to medical regulation.

SECTION F. FINANCE COMMITTEE

The Finance Committee shall be composed of five Fellows, to include the Treasurer as Chair. The Finance Committee shall review the financial condition of the FSMB, review and evaluate the costs of the activities and programs to be undertaken in the forthcoming year, present a budget for the FSMB to the Board of Directors for its recommendation to the House of Delegates at the Annual

Meeting and perform such other duties as are assigned to it by the Board of Directors. Except for the Treasurer, no Fellow shall serve on both the Audit and Finance Committees.

SECTION G. JOURNAL OF MEDICAL REGULATION

- 1. The Board of Directors shall provide for the publication of the *Journal of Medical Regulation* to further scholarship on issues of medical regulation and public protection.
- 2. A Journal Oversight Committee consisting of three (3) members of the Board of Directors and four (4) other individuals shall be appointed by the Board of Directors. Directors shall serve for a term determined by policies of the Board of Directors. Committee members who are not Directors shall serve staggered three-year terms and be limited to two full terms. The Journal Oversight Committee shall develop the annual budget for the *Journal of Medical Regulation* and ensure the editorial independence of the *Journal of Medical Regulation*.
- 3. An Editorial Board, not to exceed four (4) Fellows and five (5) non-Fellows, shall be responsible for subject matter and editorial content of the *Journal of Medical Regulation*. Members shall be selected and serve terms set forth in a process approved by the Journal Oversight Committee. No officer or member of the Board of Directors shall serve on the Editorial Board.

SECTION H. NOMINATING COMMITTEE: PROCESS FOR ELECTION

- 1. MEMBERSHIP: The Nominating Committee shall be composed of six Fellows and the Immediate Past Chair, who shall chair the Committee and serve without vote except in the event of a tie. At least one elected member of the Nominating Committee shall be a public member. With the exception of the Immediate Past Chair, no two Committee members shall be from the same member board and no officer or member of the Board of Directors shall serve on the Committee. A member of the Nominating Committee may not serve consecutive terms.
- 2. ELECTION: At least three Fellows shall be elected at each Annual Meeting of the House of Delegates by a plurality of votes cast, each to serve for a term of two years. Only an individual who is a Board Member Fellow at the time of the individual's election shall be eligible for election as a member of the Nominating Committee. In the event of a tie vote in a runoff election, up to two additional runoff elections shall be held. Prior to the election, the presiding officer shall cast a sealed vote, ranking each candidate in a list. The presiding officer's vote is counted for the candidate in the runoff election who is highest on the list. The presiding officer's vote is counted only to resolve a tie that cannot be decided by the process set forth in this section.

Members of the Nominating Committee are not eligible for inclusion on the roster of candidates for offices and positions to be filled by election at the Annual Meeting of the House of Delegates.

SECTION I. SPECIAL COMMITTEES

Special committees may be appointed by the Chair, from time to time, as may be necessary for a specific purpose.

SECTION J. REPRESENTATIVES TO OTHER ORGANIZATIONS AND ENTITIES

Appointment of all representatives of the FSMB to other official organizations or entities shall be made or nominated by the Chair, with the approval of the Board of Directors, as applicable, and shall serve for a term of three years unless the other organization shall specify some other term of appointment. Representatives to these organizations shall be Fellows, Honorary Fellows or Associate Members at the time of their appointment or nomination.

ARTICLE IX. UNITED STATES MEDICAL LICENSING EXAMINATION (USMLE)

SECTION A. Except as otherwise set forth in this Article, the composition of committees and subcommittees for the USMLE are subject to agreements with and the advice and consent of the National Board of Medical Examiners (NBME) and/or the USMLE Composite Committee. The Chair, with the approval of the Board of Directors, shall make appointments to the following USMLE committees in appropriate numbers and at appropriate times as required by the FSMB/NBME Agreement establishing the USMLE and by other agreements as may apply:

- USMLE Composite Committee, which shall be responsible for the development, operation and maintenance of policies governing the three-step USMLE. The President shall be one of the FSMB's representatives on this Committee.
- 2. USMLE Budget Committee, which shall be responsible for the development and monitoring of USMLE revenues and expenses, including the establishment of fees. FSMB representatives on the Committee will be the Chair, Chair-elect, Treasurer, President and the senior FSMB financial staff member.
- 3. The USMLE Management Committee shall be responsible for overseeing the design, development, scoring and standard setting for the USMLE Step examinations, subject to policies established by and reporting to the USMLE Composite Committee. Appointments to the Management Committee shall be made consistent with the FSMB/NBME Agreement Establishing the USMLE.

SECTION B.

The President shall provide FSMB advice and consent to the NBME for NBME's appointments to the USMLE Management Committee and/or any appointments made jointly underthe FSMB/NBME Agreement Establishing the USMLE.

ARTICLE X. POST-LICENSURE ASSESSMENT SYSTEM

The Post-Licensure Assessment Governing Committee shall be responsible for the development, operation and maintenance of policies governing the Post-Licensure Assessment System (PLAS) established by joint agreement between FSMB and NBME. The Chair, with the approval of the Board of Directors, shall make appointments to the Post-Licensure Assessment Governing Committee and its program committees in appropriate numbers and at appropriate times as required by the FSMB/NBME joint agreement establishing the Post-Licensure Assessment System and by other agreements as may apply.

ARTICLE XI. FINANCES AND DUES

SECTION A. SOURCES OF FUNDS

Funds necessary for the conduct of the affairs of the FSMB shall be derived from but not be limited to:

- 1. Annual dues imposed on the Member Medical Boards, Affiliate Members and Official Observers;
- 2. Special assessments established by the House of Delegates;
- 3. Voluntary contributions, devices, bequests and other gifts;
- 4. Fees charged for examination services, data base services, credentials verification services and publications.

SECTION B. ANNUAL DUES, ELIGIBILITY TO SERVE AS A DELEGATE

The annual dues for Member Medical Boards shall be established, from time to time, by a majority vote of the House of Delegates.

- 1. Annual dues for Member Medical Boards shall be the same for all Members regardless of their physician populations. Annual dues are due and payable not later than January 1.
- 2. Any Member Medical Board whose dues are in default at the time of the Annual Meeting of the House of Delegates shall be ineligible to have a seated delegate.

ARTICLE XII. DISCIPLINARY ACTION

SECTION A. MEMBER

For the purposes of this Article, a member shall be defined as a Member Medical Board, a Fellow, an Honorary Fellow, an Associate Member, an Affiliate Member or Official Observer.

SECTION B. AUTHORIZATION

The Board of Directors, on behalf of the House of Delegates, may enforce disciplinary measures, including expulsion, suspension, censure and reprimand, and impose terms and conditions of probation or such sanctions as it may deem appropriate, for any of the following reasons:

- 1. Failure of the member to comply or act in accordance with these Bylaws, the Articles of Incorporation of the FSMB, or other duly adopted rules or regulations of the FSMB;
- 2. Failure of the member to comply with any contract or agreement between the FSMB and such member or with any contract or agreement of the FSMB that binds such member;
- 3. Failure of the member to maintain confidentiality or security, or the permitting of conditions that allow a breach of confidentiality or security, in any manner dealing with the licensing examination process or the confidentiality of FSMB records, including the storage, administration, grading or reporting of examinations and information relating to the examination process; or
- 4. The imposition of a sanction, judgment, disciplinary penalty or other similar action by a Member Medical Board that licenses the member or by a state or federal court, or other competent tribunal, whether or not related to the practice of medicine and including conduct as a member of a Member Medical Board.

SECTION C. PROCEDURE

- 1. Any member alleged to have acted in such manner as to be subject to disciplinary action shall be accorded, at a minimum, the procedural protection set forth in the Manual for Disciplinary Procedures, which is available from the FSMB upon the written request of any member.
- 2. In event of a decision to expel a Member Medical Board pursuant to Section B, the House of Delegates shall ratify the decision at its next regularly scheduled meeting, or at an earlier meeting specially called for by the Chair in accordance with Article VII, Section B.

SECTION D. REINSTATEMENT

In the event a member is expelled from the FSMB, the member may apply to the President for

reinstatement after one year following final action on expulsion. The President shall review the application and the reason for the expulsion and forward a report to the Board. The Board may accept the application for reinstatement under such terms and conditions as it may deem appropriate, reject the application or request further information from the President. The Board's decision to accept or reject an application is final.

ARTICLE XIII. CORPORATE SEAL

The Board of Directors shall adopt a corporate seal that meets the requirements of the state in which the FSMB is incorporated.

ARTICLE XIV. ADOPTION AND AMENDMENT OF BYLAWS, EFFECTIVE DATE

SECTION A. AMENDMENT

These Bylaws may be amended at any annual meeting of the House of Delegates by two-thirds of those present and voting. Bylaws changes may be proposed only by the Board of Directors, Member Medical Boards or the Bylaws Committee and its members. All such proposals must be submitted in writing to the Bylaws Committee, in care of the Secretary of the FSMB. The Bylaws Committee shall inform the Member Medical Boards of its meeting dates not fewer than sixty days in advance of the meeting. The recommendations of the Bylaws Committee and the full texts of all proposed amendments recommended to the Committee shall be sent to each Member Medical Board not fewer than sixty days prior to the annual meeting of the House of Delegates at which they are to be considered.

SECTION B. EFFECTIVE DATE

These Bylaws and any other subsequent amendments thereto, shall become effective upon their adoption, except as otherwise provided in the amendment.

Bylaws last amended in April 2022

efile	GRAPHIC	print - DO NOT PROCESS As Filed Data -		DLN	l: 93	493111015071	
% j	990	Return of Organization Exempt From Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Co Do not enter social security numbers on this form as it n	de nav	EXHIBIT C	oitsticker.com	2019 Open to Public	
Treasu	y	► Go to <u>www.irs.qov/Form990</u> for instructions and the	e li		ex	Inspection	
_	Revenue Servic or the 2019	°∣ calendar year, or tax year beginning 05-01-2019 , and ending 04-:	30-2020				
☐ Add	ck if applicable: dress change me change	C Name of organization FEDERATION OF STATE MEDICAL BOARDS RESEARCH & EDUCATION FOUNDATION		D Employer io 36-307127		ication number	
☐ Init	tial return al return/terminate	Doing business as FSMB FOUNDATION					
☐ Am	i return/terminate iended return olication pendin	Number and street (or P.O. box if mail is not delivered to street address) Room/s	uite	E Telephone number (817) 868-4000			
		City or town, state or province, country, and ZIP or foreign postal code EULESS, TX 76039		G Gross receip	ts \$ 19	98,494	
		F Name and address of principal officer: JANELLE A RHYNE MD 400 FULLER WISER ROAD EULESS, TX 76039	H(b) A	s this a group returr ubordinates? re all subordinates	n for	□Yes ☑No	
	ebsite: ► W	•	If	ncluded? f "No," attach a list. Group exemption nu	•	instructions)	
K Forn	n of organizatio	n: ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶	L Year of	formation: 1980 M	State	of legal domicile: IL	
Pa	ntl Sun	nmary					
	1 Briefly de TO SUPP	escribe the organization's mission or most significant activities: ORT AND PROMOTE RESEARCH AND EDUCATION INITIATIVES THAT STREI H EFFECTIVE MEDICAL REGULATION.	NGTHEN TH	IE SAFETY AND QUA	ALITY	OF HEALTH CARE	
Activities & Governance	2 Check t	his box $ ightharpoonup \square$ if the organization discontinued its operations or disposed of	more than	25% of its not asso	te		
ত ×্ব		of voting members of the governing body (Part VI, line 1a)			3	9	
Sec		of independent voting members of the governing body (Part VI, line 1b)			4	6	
ET T		Imber of individuals employed in calendar year 2019 (Part V, line 2a) Imber of volunteers (estimate if necessary)			6	10	
Ac		related business revenue from Part VIII, column (C), line 12			7a	0	
		elated business taxable income from Form 990-T, line 39			7b	0	
				Prior Year		Current Year	
ġ		utions and grants (Part VIII, line 1h)		51,261		15,200	
Ravenue		n service revenue (Part VIII, line 2g)		0 56,471		19,670	
æ		evenue (Part VIII, column (A), lines 5, 4, and 7d)		30,471		19,070	
		venue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		107,732		34,870	
	13 Grants a	and similar amounts paid (Part IX, column (A), lines 1–3)		35,000		27,536	
	14 Benefits	paid to or for members (Part IX, column (A), line 4)		0		0	
88		, other compensation, employee benefits (Part IX, column (A), lines 5–10)		0		0	
Expenses		ional fundraising fees (Part IX, column (A), line 11e)		0			
শ্র		expenses (Part IX, column (A), lines 11a–11d, 11f–24e)		66,863		18,261	
	18 Total ex	penses. Add lines 13–17 (must equal Part IX, column (A), line 25)		101,863		45,797	
	19 Revenue	e less expenses. Subtract line 18 from line 12		5,869		-10,927	
Assets or Balances	20 Total as	sets (Part X, line 16)	Begin	3,424,980		3,387,352	
Net A Fund I	21 Total lia	bilities (Part X, line 26)		15,622		11,538	
		ets or fund balances. Subtract line 21 from line 20		3,409,358		3,375,814	
Under knowl	penalties of	nature Block perjury, I declare that I have examined this return, including accompanyin ef, it is true, correct, and complete. Declaration of preparer (other than off					
	****	**		2021-04-20			
Sign Here	HUMA	iture of officer AYUN J CHAUDHRY SECRETARY or print name and title		Date			
	F Type	Print/Type preparer's name Preparer's signature	Date	PTIN			
Paid		Firm's name ► CLIFTONLARSONALLEN LLP	2021-04-20		584134		
•	oarer Only	Firm's address ▶ 801 CHERRY STREET SUITE 1400		Phone no. (817) 877-			
	-	FORT WORTH, TX 76102					
M-1/4	ha IDC discus	s this return with the preparer shown above? (see instructions)			12 V	es No	

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Form	1 990 (2019)				Page 2
Pa	statemen	nt of Program Service	Accomplishments		
	Check if Sch	nedule O contains a respons	se or note to any line in this Part	:III	🗹
1		organization's mission:	·		
	UPPORT AND PROMO CTIVE MEDICAL REG		TION INITIATIVES THAT STREN	GTHEN THE SAFETY AND QUALITY OF	HEALTH CARE THROUGH
_					
2	Did the organizatio	n undertake any significant	program services during the ye	ar which were not listed on	
	the prior Form 990	or 990-EZ?			🗌 Yes 🗹 No
	If "Yes," describe t	hese new services on Sche	dule O.		
3	Did the organizatio	n cease conducting, or mal	ce significant changes in how it o	conducts, any program	
					☑ Yes ☐ No
4	Describe the organ Section 501(c)(3) a	ization's program service a	ccomplishments for each of its the are required to report the amo	hree largest program services, as mea unt of grants and allocations to others	
4a	(Code:) (Expenses \$	40,746 including grants of	\$ 27,536) (Revenue \$)
	See Additional Data				<u>, </u>
4b	(Code:) (Expenses \$	including grants of :	\$) (Revenue \$)
4c	(Code:) (Expenses \$	including grants of s	\$) (Revenue \$)
4d		vices (Describe in Schedule	•		
	(Expenses \$		ling grants of \$) (Revenue \$)
4e	Total program se	rvice expenses ►	40,746		

Par	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 2	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🔰	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		No
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D,</i> Part 26	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a		No
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🕏	11b	Yes	
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 📆	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section $170(b)(1)(A)(ii)$? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000$ of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	

Pai	Checklist of Required Schedules (continued)						
			Yes	No			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No			
23		23	Yes				
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No			
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b					
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c					
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d					
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L,</i> Part I	25a		No			
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No			
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No			
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L</i> ,Part III	27		No			
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):						
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No			
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No			
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		No			
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No			
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No			
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No			
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No			
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		No			
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes				
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No			
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b					
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No			
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No			
38							
Pa	tV Statements Regarding Other IRS Filings and Tax Compliance						
	Check if Schedule O contains a response or note to any line in this Part V						
	The state of the s	-i	Yes	No			
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 1						
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . 1b 0						
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			l			
·	(gambling) winnings to prize winners?	1c					
		F	orm 99	0 (2019)			

Pa	Statements Regarding Other IRS Filings and Tax Compliance (continued)		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	No
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization	6a	No
Ua	solicit any contributions that were not tax deductible as charitable contributions?	04	I NO
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	No
d	If "Yes," indicate the number of Forms 8282 filed during the year		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter:		
а	Initiation fees and capital contributions included on Part VIII, line 12 10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
а	Gross income from members or shareholders		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
_	Enter the amount of reserves on hand]	
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15	No
16	16	No	

Form 990 (2019) Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines Part VI 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. $\overline{\mathbf{A}}$ Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes Nο 1a Enter the number of voting members of the governing body at the end of the tax year 9 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? Nο Did the organization delegate control over management duties customarily performed by or under the direct supervision Nο of officers, directors or trustees, or key employees to a management company or other person? . Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . 4 Nο 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 Nο 6 6 Nο 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 7a Yes b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or 7b Nο 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a Yes 8b Yes **b** Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O No Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Νo 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the 11a Yes **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. . **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Yes b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to 12h Yes Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in 12c Yes Did the organization have a written whistleblower policy? 13 Yes Did the organization have a written document retention and destruction policy? Yes 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a Nο 15b Nο If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16a Nο b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt 16b Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed▶ Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s 18 only) available for public inspection. Indicate how you made these available. Check all that apply. ☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest

State the name, address, and telephone number of the person who possesses the organization's books and records:

policy, and financial statements available to the public during the tax year.

▶TODD PHILLIPS CFO 400 FULLER WISER ROAD EULESS, TX 76039 (817) 868-4000

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

Check this box if neither the organization no	•	ganizat	ion c	omp	ens	ated a	iny c	current officer, dire	ctor, or trustee.		
(A) Name and title	(B) Average hours per week (list any hours for related organizations	,	one booth a direct	ox, ι n of or/t	t ch unle fice rust	ss pers and a ee)	son	(D) Reportable compensation from the organization (W-2/1099- MISC)	(E) Reportable compensation from related organizations (W-2/1099- MISC)	(F) Estimated amount of other compensation from the organization and	
	below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	related organizations	
(1) DR HUMAYUN J CHAUDHRY DO SECRETARY	3.00	×		х				0	726,518	129,140	
(2) PATRICIA A KING MD PHD DIRECTOR	2.00	х						0	72,136	0	
(3) CHERYL WALKER-MCGILL MD DIRECTOR	2.00 18.00	х						0	33,763	0	
(4) KENNETH B SIMONS MD DIRECTOR	2.00 18.00	Х						0	274	0	
(5) KATHLEEN HALEY JD DIRECTOR	2.00	Х						0	0	0	
(6) ARTHUR S HENGERER MD DIRECTOR	2.00	x						0	0	0	
(7) CLAUDETTE DALTON MD DIRECTOR	2.00	х						0	0	0	
(8) JANELLE A RHYNE MD PRESIDENT	10.00	х		×				0	0	0	
(9) RANDAL C MANNING VICE PRESIDENT	10.00	Х		x				0	0	0	
(10) RALPH C LOOMIS MD TREASURER	10.00	х		х				0	0	0	

Form 990 (2019) Page 8 Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and title	(B) Average hours per week (list any hours	than c	ne b	ox, ι in of	t ch unle: ficer	and a	on	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	compensation from the		ated of other sation the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099- MISC)	(W-2/1099- MISC)		rganizat relat organiza	ed
-													
	Sub-Total						•			<u>'</u>			
	「otal from continuation sheets to P 「otal (add lines 1b and 1c) . .	•					•		0	832,691			129,140
2	Total number of individuals (including of reportable compensation from the	g but not limited	to thos				e) who	rece	eived more than \$1	00,000			
												Yes	No
3	Did the organization list any former line 1a? <i>If "Yes," complete Schedule</i>										3		No
4	For any individual listed on line 1a, is organization and related organization individual	s greater than \$		0? <i>If</i>						n the	4	Yes	
5	Did any person listed on line 1a recei									ividual for	-		

Section B. Independent Contractors

Part VII

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

² Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 0

Form 990 (2019)

Part VIII Statement of Revenue Page **9**

		Check if Sche	dule	O contains a	respo	nse or note to any	line in this Part VIII		<u> </u>	🗆
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
10	1 a	Federated campa	aigns	3 . .	1a			revenue		512 - 514
s, Grants Amounts		b Membership due	s.		1 b					
9 10 10 10 10 10 10 10 10 10 10 10 10 10		c Fundraising events 1c								
ifts, ar A	1	d Related organiza	tions	5	1d					
<u>1</u> 5 .≅	١	e Government grants (contributions)								
Contributions, Gifts, and Other Similar A	1	f All other contributions, gifts, grants, and similar amounts not included above				15,200				
ntribu 4 Oth	9	g Noncash contribution lines 1a - 1f:\$	ons in	cluded in	1 g					
Cont		h Total. Add lines	1a-1	f		•	15,200			
						Business Code				
	2a									
n.										
eş.	b									
l e o	С									
ŞeL		d								
an an	l u									
Program Service Revenue	е									
Ξ	f	All other program	serv	rice revenue						
		Total. Add lines								
	3]	Investment income	(inc	luding divid		nterest, and other	15,24	17		15,247
		similar amounts) . Income from invest		 nt of tax-exe	not be	and proceeds i	13,24			13,247
		Royalties			=		•			
				(i) Rea	al	(ii) Personal				
	6a	Gross rents	6a							
		Less: rental					-			
		expenses	6b				_			
	С	Rental income or (loss)	6с							
	d	Net rental income	e or	(loss)						
	_	Constant		(i) Secur	ities	(ii) Other	_			
	/a	Gross amount from sales of assets other than inventory	7a		168,047					
	b	Less: cost or	7b		163,624		7			
		other basis and sales expenses			103,021		4			
		Gain or (loss)	7 c		4,423		_ 4,42	12		4,423
		I Net gain or (loss) Gross income from fo				•	7,72			7,423
ıμe		(not including \$ contributions reporte	d on							
Se		See Part IV, line 18			8a					
æ	b	Less: direct exper	ises		8b					
Other Revenue	C	: Net income or (los	ss) fr	om fundrais	ing eve	ents >	7			
	9a	Gross income from	gam	ing activities.						
		See Part IV, line 19			9a					
		Less: direct exper : Net income or (los			9b	AS .				
	ľ	Thee meanie or (10)	JJ) 11	om gaming		es <u></u>				
	10a	Gross sales of inverse and allowa	ento	ry, less						
	 	Less: cost of good			10a 10b		_			
		Net income or (los			ш	ory ►				
		Miscellaneo				Business Code				
	11	.a								
	l b						1			
	c									
		-								
		All other revenue Total. Add lines 1			Ĺ	•				
	12	: Total revenue. S	ee ir	istructions		· · · · •	34.87	_{'n}		19 670

Pa	TIX Statement of Functional Expenses				
	Section 501(c)(3) and 501(c)(4) organizations must o	complete all columns.	All other organization	ns must complete co	lumn (A).
	Check if Schedule O contains a response or note to ar	ny line in this Part IX	<u></u>	<u>.</u>	🗆
	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	27,536	27,536		
	Grants and other assistance to domestic individuals. See Part IV, line 22				
	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members				
	Compensation of current officers, directors, trustees, and key employees				
	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	2,558		2,558	
	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,876	1,876		
12	Advertising and promotion				
13	Office expenses	2,493		2,493	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	9,297	9,297		
	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,037	2,037		
20	Interest				
21	Payments to affiliates				
	Depreciation, depletion, and amortization				
23	Insurance				
	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
:					
<u> </u>					
-					
-					
-	All other expenses				
	Total functional expenses. Add lines 1 through 24e	45,797	40,746	5,051	0
	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720).				

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part IX . (A) (B) Beginning of year End of year 31.007 **1** Cash-non-interest-bearing 30,102 1 204.927 2 213.945 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 36.878 4 3.850 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)... 6 7 Assets 8 9 Prepaid expenses and deferred charges . 10a Land, buildings, and equipment: cost or other 10a basis, Complete Part VI of Schedule D 10b Less: accumulated depreciation 10c 11 Investments—publicly traded securities . 1.892.847 11 1.848.504 Investments—other securities. See Part IV, line 11 . . . 1.259.726 12 1 289 546 12 Investments—program-related, See Part IV, line 11. 13 13 14 14 500 500 15 Other assets. See Part IV, line 11 15 3,424,980 3.387.352 16 **Total assets.** Add lines 1 through 15 (must equal line 34) . 16 15.622 11.538 17 17 Accounts payable and accrued expenses 18 Grants pavable . . . 18 19 19 Deferred revenue . 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 iabilities 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . 23 23 Secured mortgages and notes payable to unrelated third parties . . . Unsecured notes and loans payable to unrelated third parties . 24 Other liabilities (including federal income tax, payables to related third parties, 25 and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D 15,622 26 11,538 26 Total liabilities. Add lines 17 through 25 . . Balances Organizations that follow FASB ASC 958, check here **> \overline{\sigma}** and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions 3,409,358 27 3,375,814 28 Net assets with donor restrictions 28 Fund Organizations that do not follow FASB ASC 958, check here ightharpoonup and complete lines 29 through 33. ö 29 Capital stock or trust principal, or current funds . . . 29

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Total liabilities and net assets/fund balances . . .

Total net assets or fund balances

Assets 30

31

32

33

3.375,814

3.387.352

30

31

32

33

3,409,358

3.424.980

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Form	990 (2019)				Page 12
Pa	Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1			34,870
2	Total expenses (must equal Part IX, column (A), line 25)	2			45,797
3	Revenue less expenses. Subtract line 2 from line 1	3			-10,927
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,4		
5	Net unrealized gains (losses) on investments	5			-22,617
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			C
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		3,	375,814
Pa	tXII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
		-		Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	Į	2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on separate basis, consolidated basis, or both:	a			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate be consolidated basis, or both:	asis,			
	☐ Separate basis ☑ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedu	ıle O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing Audit Act and OMB Circular A-133?	le	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	:d	3b		
			F	orm 99	0 (2019)

MK0033

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Additional Data

Software ID:

Software Version:

EIN: 36-3071272

FEDERATION OF STATE MEDICAL BOARDS RESEARCH & EDUCATION FOUNDATION

Form 990 (2019)

Form 990, Part III, Line 4a:

THE FOUNDATION AWARDED FUNDING TO STATE MEDICAL BOARDS AND OTHER ORGANIZATIONS THAT ARE CONDUCTING RESEARCH, DEVELOPING EDUCATIONAL MATERIALS AND INCREASING AWARENESS ABOUT TOPICS OF IMPORTANCE TO MEDICAL REGULATORS. THE LATEST EXAMPLES OF FOUNDATION GRANTS INCLUDE: A) ADMINISTRATORS IN MEDICINE (AIM): THE FOUNDATION PROVIDED A \$23,791 GRANT TO AIM TO HELP FUND ITS FIRST-EVER CERTIFIED MEDICAL BOARD LICENSURE PREMATURE MORTALITY AND DISCIPLINARY AND REMEDIATION EFFORTS OF THE BOARD: AND C). COVID-19 GRANTS

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

SCHEDULE A

Department of the Treasury

(Form 990 or 990EZ)

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

DLN: 93493111015071 OMB No. 1545-0047

Open to Public Inspection

Name of the organization FEDERATION OF STATE MEDICAL BOARDS

Employer identification number

RESEA	ARCH &	EDUCATION FOUNDATION					36-3071272				
	rt I	Reason for Public					ee instructions.				
The o	organiz	ation is not a private fou	ındation because i	it is: (For lines 1 throu	igh 12, check or	lly one box.)					
1		A church, convention of	f churches, or ass	ociation of churches d	escribed in sect	ion 170(b)(1)(A)(i).				
2		A school described in s	ection 170(b)(1)(A)(ii). (Attach Sch	edule E (Form 99	90 or 990-EZ).)					
3		A hospital or a coopera	tive hospital servi	ce organization descri	bed in section :	170(b)(1)(A)(i	ii).				
4		A medical research org name, city, and state:	anization operated	d in conjunction with a	a hospital describ	oed in section 1	70(b)(1)(A)(iii). En	ter the hospital's			
5		An organization operate (b)(1)(A)(iv). (Comp		of a college or univers	sity owned or op	erated by a gove	ernmental unit describ	ed in section 170			
6		A federal, state, or loca	al government or g	governmental unit des	cribed in sectio	n 170(b)(1)(A)(v).				
7		An organization that no section 170(b)(1)(A)			support from a	governmental ur	nit or from the genera	I public described in			
8		A community trust desc	cribed in section	170(b)(1)(A)(vi). (Complete Part II	.)					
9		An agricultural research						ege or university or a			
10		An organization that no from activities related to investment income and	non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university: An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)								
11		An organization organiz	zed and operated	exclusively to test for	public safety. Se	ee section 509((a)(4).				
12	V	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) . See section 509(a)(3) . Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12q.									
а	✓	Type I. A supporting o organization(s) the pov complete Part IV, Se	ver to regularly ap								
b		Type II. A supporting management of the sup must complete Part 1	pporting organizat	ion vested in the sam							
С		Type III functionally supported organization						ed with, its			
d		Type III non-functio functionally integrated. instructions). You must	The organization	generally must satisfy	/ a distribution r						
е		Check this box if the or integrated, or Type III				S that it is a Typ	oe I, Type II, Type III	functionally			
f	Enter	the number of supporte	,		3		1				
g	Provi	de the following informat	tion about the sup	ported organization(s).						
		lame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document? wonetary supp		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)			
					Yes	No					
		TION OF STATE MEDICAL THE UNITED STATES	751092490	10	Yes		0	0			
Tota	ı	1	I			1	0	l (

	(Complete only if you che If the organization failed	cked the box o	n line 5, 7, or 8	of Part I or if th	ne organization	failed to qualify	
_	Section A. Public Support	to quality unde	i the tests lister	i below, please	complete Part I	11.)	
_	Calendar vear						
	(or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
2	include any "unusual grant.") Tax revenues levied for the						-
2	organization's benefit and either paid						
	to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
_	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f).						
6	Public support. Subtract line 5 from						
_	line 4.						
_	Section B. Total Support Calendar year			1	I		
	(or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7							
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and						
9	income from similar sources. Net income from unrelated business						
9	activities, whether or not the						
	business is regularly carried on						
10							
	loss from the sale of capital assets						
	(Explain in Part VI.).						
11	Total support. Add lines 7 through						
12		tc. (see instructio	ns)			12	
	Gross receipts from related activities, etc. (see instructions)						
13	-	-			•		
_	check this box and stop here				· · · · · · · · ·	P L	
	Section C. Computation of Public	• •					
	Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))						
	Public support percentage for 2018 Schedule A, Part II, line 14						
16	16a 33 1/3% support test—2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box						
ı	and stop here. The organization qualifies as a publicly supported organization						
box and stop here. The organization qualifies as a publicly supported organization							▶□
17	in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported						
ŀ	organization						
18	supported organization Private foundation. If the organizatio						▶□
	instructions						▶□

P	Support Schedule for							
	(Complete only if you o					to qualif	y unde	r Part II. If
-	the organization fails to ection A. Public Support	quality under t	ne tests listed l	below, please co	mpiete Part II.)			
36	Calendar year	() 2015	(1) 224.6	() 2247	(1) 2010		10	(O.T.: 1
	(or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 20	19	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received. (Do not include any "unusual grants.") .							
2	Gross receipts from admissions,							
	merchandise sold or services							
	performed, or facilities furnished in any activity that is related to the							
	organization's tax-exempt purpose							
3	Gross receipts from activities that are							
	not an unrelated trade or business							
4	under section 513 Tax revenues levied for the							
•	organization's benefit and either paid							
	to or expended on its behalf							
5	The value of services or facilities							
	furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1 through 5							
7a	Amounts included on lines 1, 2, and	·						
	3 received from disqualified persons				 			
D	Amounts included on lines 2 and 3 received from other than disqualified							
	persons that exceed the greater of							
	\$5,000 or 1% of the amount on line							
_	13 for the year.							
8	Add lines 7a and 7b Public support. (Subtract line 7c							
	from line 6.)							
Se	ction B. Total Support							
	Calendar year	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 20	19	(f) Total
9	(or fiscal year beginning in) ► Amounts from line 6	. ,	. ,	. ,	` ,			.,
L0a	Gross income from interest,							
LOG	dividends, payments received on							
	securities loans, rents, royalties and							
b	income from similar sources Unrelated business taxable income							
U	(less section 511 taxes) from							
	businesses acquired after June 30,							
	1975.							
11	Add lines 10a and 10b. Net income from unrelated business							
11	activities not included in line 10b,							
	whether or not the business is							
4.2	regularly carried on.							
12	Other income. Do not include gain or loss from the sale of capital assets							
	(Explain in Part VI.)							
13	Total support. (Add lines 9, 10c,							
14	11, and 12.) First five years. If the Form 990 is fo	r the organization	ı 's first, second tl	ı nird, fourth, or fift	ı <u>l</u> h tax vear as a sec	tion 501/	(3) or	ganization.
	check this box and stop here	-			•			
Se	ection C. Computation of Public							
15	Public support percentage for 2019 (lin			column (f))		15		
16	Public support percentage from 2018 S	Schedule A, Part I	II, line 15			16		
Se	ection D. Computation of Invest							
17	Investment income percentage for 20:	L9 (line 10c, colui	nn (f) divided by	line 13, column (f))	17		
18	Investment income percentage from 2					18		
19a	331/3% support tests—2019. If the	organization did r	ot check the box	on line 14, and lir	ne 15 is more than	33 1/3%,	and line	17 is not
	more than 33 1/3%, check this box and							
b	33 1/3% support tests—2018. If the							
	not more than 33 1/3%, check this box		=					
20	Private foundation If the organization	an did not chack -	boy on line 14 1	On or 10h chack	this boy and soo is	etruction	_	▶□

Schedule A (Form 990 or 990-EZ) 2019

Page 4

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

36	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	Yes	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509		165	
_	(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		No
22	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			NO
Ja	below.	3a	Yes	
h	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied	3a	res	
	the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b	Yes	
•	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?	30	res	
·	If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c	Yes	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b in Part I, answer (b) and (c) below.	4a		No
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or	4b		
	supervised by or in connection with its supported organizations.			
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	, , , , , , , , , , , , , , , , , , , ,			
	(c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the			
	organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		No
ь	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the			
	organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.			
_		6		No
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).			
	· '	7		No
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		No
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	0-		
L	Did one or more disgualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting	9a		No
U	organization had an interest? If "Yes," provide detail in Part VI.	9b		No
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in			
	which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		No
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.			
		10a		No
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		

Schedule A (Form 990 or 990-EZ) 2019

P	art IV	Supporting Organizations (continued)			
				Yes	No
11	. Has t	the organization accepted a gift or contribution from any of the following persons?			
a		rson who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
	gove	rning body of a supported organization?	11a		No
Ł	A fan	nily member of a person described in (a) above?	11b		No
c	A 35	% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .	11c		No
5	ection	B. Type I Supporting Organizations			
				Yes	No
1	elect VI ho organ trusto	the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part ow the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the nization had more than one supported organization, describe how the powers to appoint and/or remove directors or nees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such that the tax year.	1	Yes	
2	opera <i>carrie</i>	he organization operate for the benefit of any supported organization other than the supported organization(s) that ated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit ed out the purposes of the supported organization(s) that operated, supervised or controlled the supporting nization.	2	165	No
5	Section	C. Type II Supporting Organizations			
				Yes	No
1		a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of			
		of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the orting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
-	Section	D. All Type III Supporting Organizations			
				Yes	No
1	Did t	he organization provide to each of its supported organizations, by the last day of the fifth month of the organization's			
	Form	ear, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing			
		ments in effect on the date of notification, to the extent not previously provided?	1		
2	(s) o	eany of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization r (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization tained a close and continuous working relationship with the supported organization(s).			
_	Б		2		
3	orgar	eason of the relationship described in (2), did the organization's supported organizations have a significant voice in the nization's investment policies and in directing the use of the organization's income or assets at all times during the tax of the scribe in Part VI the role the organization's supported organizations played in this regard.	3		
•	Section	E. Type III Functionally-Integrated Supporting Organizations			
1		k the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructi	ons):		
	a 🗌	The organization satisfied the Activities Test. Complete line 2 below.			
	b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
	c _	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activ	ities Test. Answer (a) and (b) below.		Yes	No
	suppo orga respo	ubstantially all of the organization's activities during the tax year directly further the exempt purposes of the orted organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported inizations and explain how these activities directly furthered their exempt purposes, how the organization was possive to those supported organizations, and how the organization determined that these activities constituted stantially all of its activities.	2a		
	orgar <i>orgar</i>	he activities described in (a) constitute activities that, but for the organization's involvement, one or more of the nization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the nization's position that its supported organization(s) would have engaged in these activities but for the organization's vement.	2b		
3		nt of Supported Organizations. Answer (a) and (b) below.	4 D		
•	a Did t	to organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of upported organizations? <i>Provide details in Part VI</i> .	3a		
	b Did t	he organization exercise a substantial degree of direction over the policies, programs and activities of each of its orted organizations? <i>If "Yes," describe in Part VI. the role played by the organization in this regard.</i>	21-		

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Schedule A (Form 990 or 990-EZ) 2019

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Pa	Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgan	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-in instructions)	tegrat	ed Type III supporting o	rganization (see

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions			Current Year
Amounts paid to supported organizations to accomplish	exempt purposes		
2 Amounts paid to perform activity that directly furthers excess of income from activity		organizations, in	
3 Administrative expenses paid to accomplish exempt pur	ons		
4 Amounts paid to acquire exempt-use assets	· · · · · ·		
· · · · · · · · · · · · · · · · · · ·	٦/		
5 Qualified set-aside amounts (prior IRS approval require	,		
6 Other distributions (describe in Part VI). See instruction	ons		
7 Total annual distributions. Add lines 1 through 6.			
8 Distributions to attentive supported organizations to wh details in Part VI). See instructions	nich the organization is respon	sive (provide	
9 Distributable amount for 2019 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations	(i)	(ii)	(iii)
(see instructions)	Excess Distributions	Underdistributions Pre-2019	Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014			
b From 2015			
c From 2016			
d From 2017			1
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7:			
Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI.			
See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015			
b Excess from 2016			
c Excess from 2017			
d Excess from 2018 e Excess from 2019			

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Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1, c2, az, b3, aa and 3b; Part V, II Part V, Section B, line 1; Part V, Section B,

Facts And Circumstances Test

990 Schedule A. Supplemental Information

Return Reference	Explanation
	THE ORGANIZATION CONFIRMS ANNUALLY THAT THE SUPPORTED 501(C)(6) ORGANIZATION SATISFIES THE PUBLIC SUPPORT TESTS UNDER SECTION 509(A)(2). THIS CONFIRMATION LAST TOOK PLACE IN 2019.

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MK0043

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DLN: 93493111015071 OMB No. 1545-0047

Inspection

Employer identification number

SCHEDULE D

Department of the Treasury

Internal Revenue Service

(Form 990)

Supplemental Financial Statements ▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization FEDERATION OF STATE MEDICAL BOARDS

RESEARCH & EDUCATION FOUNDATION 36-3071272 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible ☐ Yes ☐ No Part II **Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area ☐ Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year Total number of conservation easements . . . Total acreage restricted by conservation easements 2h h Number of conservation easements on a certified historic structure included in (a) 2c c Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic 2d structure listed in the National Register . . . Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located \blacktriangleright Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)☐ Yes □ No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

Cat. No. 52283D Schedule D (Form 990) 2019

Sche	dule D	(Form 990) 2019										Page 2
Par	t III	Organizations Maintaining C	collections of Art, I	Histor	ical T	reas	sures, o	r Othei	Similar Asse	ts (conti	nued)	
3		the organization's acquisition, access (check all that apply):	sion, and other records	, check	any of	the	following	that are	a significant use	of its coll	ection	
а		Public exhibition		d		Loa	n or exch	ange pro	grams			
b		Scholarly research		е		Oth	er				••	
C		Preservation for future generations										
4	Provid Part >	de a description of the organization's (III.	collections and explain	how th	ey furt	her t	he organi	zation's e	exempt purpose	in		
5		g the year, did the organization solici s to be sold to raise funds rather thar							_	Yes	□ N	o
Pa	rt IV	Escrow and Custodial Arrange Complete if the organization are X, line 21.		rm 990), Part	: IV,	line 9, o	r report	ed an amount	on Form	990,	Part
1a		e organization an agent, trustee, custo led on Form 990, Part X?							_	Yes	□ N	o
b	If "Ye	es," explain the arrangement in Part X	(III and complete the fo	ollowing	table:				Amo	unt		_
c	Begin	ning balance						1c				_
d	Addit	ions during the year						1 d				_
е	Distri	butions during the year						1e				_
f	Endin	g balance						1f				_
2a	Did th	ne organization include an amount on	Form 990, Part X, line	21, for	escrov	v or c	custodial a	account l	iability? [Yes	\square N	o
b	If "Ye	s," explain the arrangement in Part X	III. Check here if the e	xplanat	tion ha	s bee	n provide	d in Part	хии]		
Pa	rt V	Endowment Funds.										
		Complete if the organization ar							I. n =	.1		
1.	Roginn	ing of year balance	(a) Current year 2,561,788	(b)	Prior yea	ar 7,504	(c) Two y	ears back, 2,251,29			our yea	036,551
	-	ing of year balance outions	2,301,700		2,40	7,304		2,231,29	-	,000		
			4,226		25	6,711		315,05		,165		-66,324
		restment earnings, gains, and losses or scholarships	,,,,,			-/:				,		
		expenditures for facilities								_		
-		ograms	0		15	4,500		85,82	.3 16	,487		16,140
f	Admini	strative expenses	2,558			7,927		13,02	5 13	,469		
g	End of	year balance	2,563,456		2,56	1,788		2,467,50	4 2,251	,295	1,9	954,087
2	Provid	de the estimated percentage of the cu	urrent year end balance	(line 1	.g, colu	ımn (a)) held a	as:	•	•		
а	Board	designated or quasi-endowment >	100.000 %									
b	Perm	anent endowment ►										
С	Temp	orarily restricted endowment ►	•									
	The p	ercentages on lines 2a, 2b, and 2c sh	nould equal 100%.									
3a		nere endowment funds not in the pos	session of the organiza	tion tha	at are h	ield a	ınd admin	istered f	or the			
	_	ization by:								3a(i)	Yes	No No
		nrelated organizations elated organizations		•		•				3a(ii)	\vdash	No
b		s" on 3a(ii), are the related organizat		on Sche	• • edule R	· ? .				3b	\vdash	
4		ibe in Part XIII the intended uses of t										
Pa	rt VI	Land, Buildings, and Equipm	nent.									
		Complete if the organization ar	nswered "Yes" on Fo									
	Descri		other basis (b) Cost tment)	or othe	r basis (other) (c) Acc	cumulated	depreciation	(d) Bo	ook value	e
1a	Land											
b	Buildin	gs										
		old improvements										
		nent					1					
е	Other											
		lines 12 through 10 (Column (d) mus	ct caual Form COC Par	- V1	/D	1 lim	0.10(6)					

Case 2:22-cv-03301-JFM Document 7-1 Filed 12/05/22 Page 46 of 86 Schedule D (Form 990) 2019 Page 3 Part VII Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12 (b) Book value (c) Method of valuation: (a) Description of security or category (including name of security) Cost or end-of-year market value (1) Financial derivatives (2) Closely-held equity interests (3) Other _____(A) MERCATOR FUND (DE) LP 1,289,546 С (B) (C) (D) (E) (F) (G) (H) Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) 1.289.546 Investments-Program Related. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.) Part IX Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15 (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) **Total.** (Column (b) must equal Form 990, Part X, col.(B) line 15.) Part X Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f.See Form 990, Part X line 25. (a) Description of liability (b) Book value 1. (1) Federal income taxes (2) (3) (4) (5) (6) (7)

Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

(8) (9) (10) Schedule D (Form 990) 2019 Page 4 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 1 Amounts included on line 1 but not on Form 990, Part VIII, line 12: Net unrealized gains (losses) on investments 2a Donated services and use of facilities 2h Recoveries of prior year grants 2c Other (Describe in Part XIII.) 2d Add lines 2a through 2d 2e е 3 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b. 4a 4b Add lines **4a** and **4b** 4c Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 1 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities 2a Prior year adjustments 2h 2c Other losses . . 2d Other (Describe in Part XIII.) Add lines 2a through 2d . 2e 3 Subtract line 2e from line 1 . 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b . . . 4b Other (Describe in Part XIII.) 4c Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 Part XIII Supplemental Information Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. Return Reference Explanation See Additional Data Table

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Schedule D (Form 990) 2019	Page
Part XIII Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2019

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Additional Data

Software ID: Software Version:

EIN: 36-3071272

Name: FEDERATION OF STATE MEDICAL BOARDS

RESEARCH & EDUCATION FOUNDATION

Supplemental Information

Return Reference	Explanation
PART V, LINE 4:	THE ENDOWMENT SHALL BE USED SOLELY TO SUPPORT THE FSMB FOUNDATION'S MISSION TO UNDERTAKE E DUCATIONAL AND SCIENTIFIC RESEARCH PROJECTS DESIGNED TO EXPAND PUBLIC AND MEDICAL PROFESSI ONAL AWARENESS AND KNOWLEDGE OF CHALLENGES IMPACTING HEALTH CARE AND HEALTH CARE REGULATIO N IN ORDER TO CREATE STRONGER AND MORE EFFECTIVE MEDICAL LICENSURE AND REGULATION.

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MK0050

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efile GRAPHIC print -	DO NOT PROCESS	As Filed Data -					DLI	N: 9349311101507	1
Note: To capture the f Schedule I (Form 990) Department of the Treasury	•	Grants and C Governments a mplete if the organiza	lect landscape mode other Assistand and Individuals tion answered "Yes," o Attach to Form w.irs.gov/Form990 for	ce to Organiz s in the Unite on Form 990, Part IV	ations, d States , line 21 or 22.		0	MB No. 1545-0047 2019 Open to Public Inspection	
Internal Revenue Service Name of the organization FEDERATION OF STATE MED RESEARCH & EDUCATION FO Parit General Inf		and Assistance					nployer identifica -3071272	ation number	_
 Does the organization the selection criteria to Describe in Part IV the Part II Grants and Ot 	maintain records to subsused to award the grants e organization's procedur	stantiate the amount of to or assistance? es for monitoring the use estic Organizations ar	e of grant funds in the Un The document of the Un The document of the United Section 1 is a se	nited States.	for the grants or assistance	,	90, Part IV, line	Yes 1	— N o
(a) Name and address of organization or government	of (b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)		scription of n assistance	(h) Purpose of grant or assistance	:
(1) ADMINISTRATORS IN MEDICINE 1500 SUNDAY DR SUITE 1 RALEIGH, NC 27607	74-2329314	501(C)(6)	23,791					TO SUPPORT AIM IN THEIR CERTIFIED MEDICAL BOARD LICENSURE TRAINING PROGRAM.	3
	section 501(c)(3) and go other organizations lister	-					<u> </u>		0

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(a) Type of grant or a	assistance	(b) Number recipients	of	(c) Amour cash gra		(d) Amount of noncash assistance	e	(e) Method of valuation FMV, appraisal, oth		(f) Description of noncash assistance
1)										
2)										
3)										
4)										
5)										
6)										
7)										
Part IV Supplem	ental Informati	on. Provide the i	nformatio	n required in	Part I,	line 2; Part III, col	um	n (b); and any other	addition	al information.
Return Reference	Explanati	on								
ART I, LINE 2:	AGREE TO PROGRESS OF PROJEC	PROVIDE THE FOUN MADE TOWARD AC T COMPLETION, YO	IDATION V HIEVING ⁻ U ALSO AG	VITH A WRITTEN THE PURPOSES (GREE TO PROVIC	REPOR OF THE	T SUMMARIZING THE GRANT AND INCLUDE ITTEN REPORT THAT	ST AN INC	ATUS OF THE PROJECT. I ACCOUNTING OF THE U CLUDES A NARRATIVE O	THIS REI JSES OR WHAT V	MONTHS OF RECEIPT OF FUNDING, YOU PORT SHOULD INCLUDE A DESCRIPTION OI EXPENDITURE OF FUNDS. WITHIN 60 DAYS WAS ACCOMPLISHED BY THE GRANT SUCH AS 100% OF THE PROJECT COST.
	•									Schedule I (Form 990) 2019

DLN: 93493111015071 OMB No. 1545-0047

Open to Public

Inspection

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

Compensation Information

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization FEDERATION OF STATE MEDICAL BOARDS RESEARCH & EDUCATION FOUNDATION

Employer identification number

36-3071272

Pa	rt I Questions Regarding Compensation					
					Yes	No
1a	Check the appropiate box(es) if the organization provid 990, Part VII, Section A, line 1a. Complete Part III to p					
	First-class or charter travel		Housing allowance or residence for personal use			
	☐ Travel for companions		Payments for business use of personal residence			
	Tax idemnification and gross-up payments		Health or social club dues or initiation fees			
	☐ Discretionary spending account		Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on Line 1a are checked, did the orga- reimbursement or provision of all of the expenses descr			1b		
2	Did the organization require substantiation prior to reim directors, trustees, officers, including the CEO/Executive			2		
3	Indicate which, if any, of the following the filing organiz organization's CEO/Executive Director. Check all that as used by a related organization to establish compensation	oply. Do r	not check any boxes for methods			
	Compensation committee		Written employment contract			
	☐ Independent compensation consultant		Compensation survey or study			
	Form 990 of other organizations		Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Parrelated organization:	rt VII, Se	ction A, line 1a, with respect to the filing organization or a			
а	Receive a severance payment or change-of-control payer	ment? .		4a		No
b	Participate in, or receive payment from, a supplemental	l nonqual	ified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-base	d comper	nsation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and provid	e the app	licable amounts for each item in Part III.			
	Only E01(a)(3) E01(a)(4) and E01(a)(20) argan	izationo	must complete lines E 0			
5	Only 501(c)(3), 501(c)(4), and 501(c)(29) organi For persons listed on Form 990, Part VII, Section A, line compensation contingent on the revenues of:					
	,					
a	The organization?			5a		No
b	Any related organization?			5b		No
6	For persons listed on Form 990, Part VII, Section A, line compensation contingent on the net earnings of:	e 1a, did (the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		No
-	If "Yes," on line 6a or 6b, describe in Part III.			"		110
7	For persons listed on Form 990, Part VII, Section A, line payments not described in lines 5 and 6? If "Yes," described in lines 6 and 6			7		No
8	Were any amounts reported on Form 990, Part VII, pair subject to the initial contract exception described in Rec	gulations	section 53.4958-4(a)(3)? If "Yes," describe			
				8		No
9	If "Yes" on line 8, did the organization also follow the re	ebuttable	presumption procedure described in Regulations section			

Schedule J (Form 990) 2019

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

Note. The sum of column	ıs (R)(i)-(iii) for each listed in	dividual must equal the to	otal amount of Form 990,	Part VII, Section A, line	1a, applicable column (D)	and (E) amounts for tha	t individual.
(A) Name and Title			of W-2 and/or 1099-MIS		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
1 1		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	column (B) reported as deferred on prior Form 990
1 DR HUMAYUN J CHAUDHRY	(i)	0	0	0	0	0	0	0
DO SECRETARY	(ii)	606,534	72,311	47,673	101,827	27,313	855,658	0
_								
-								
-								
-								
-								
								1/Form 000) 2010

Schedule J (Form 990) 2019

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chedule J (Form 990) 2019	Page 3										
	till Supplemental Information										
rovide the information, explanation, or	descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.										
Return Reference	Explanation										
ART I, LINE 4B	DR. HUMAYUN J. CHAUDHRY, DO - 457(F) PLAN EMPLOYER CONTRIBUTIONS \$59,827. THERE WERE NO DISTRIBUTIONS IN FY2020.										
	FIG. THE PRIPOSE OF DETERMINANC COMPRESATION, THE REPORTING ORGANIZATION DOES NOT COMPRESATE ANY OFFICER-DIRECTORS. THE RELIED ON RELIED OR RELIED OR RELIED OR RELIED OR THE RELIED OR RELIED OR THE RELIED OF THE										

Schedule J (Form 990) 2019

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efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493111015071 OMB No. 1545-0047 SCHEDULE O Supplemental Information to Form 990 or 990-EZ (Form 990 or 990-Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. EZ) ▶ Attach to Form 990 or 990-EZ. Open to Public ▶ Go to www.irs.gov/Form990 for the latest information. Inspection Department of the Treasury Namel Betherofganization **Employer identification number** FEDERATION OF STATE MEDICAL BOARDS RESEARCH & EDUCATION FOUNDATION 36-3071272

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 3	IN FY2020, THE FSMB FOUNDATION EXPANDED ITS GRANTMAKING CAPABILITIES, SUPPORTING NEW PROJE CTS NATIONWIDE THAT WILL ULTIMATELY BENEFIT MEDICAL REGULATION AND PUBLIC PROTECTION. USIN G A NEW, MORE FLEXIBLE GRANT STRUCTURE, THE FOUNDATION AWARDED FUNDING TO STATE MEDICAL BO ARDS AND OTHER ORGANIZATIONS THAT ARE CONDUCTING RESEARCH, DEVELOPING EDUCATIONAL MATERIAL S AND INCREASING AWARENESS ABOUT TOPICS OF IMPORTANCE TO MEDICAL REGULATORS. ADDITIONALLY, THE FOUNDATION BEGAN DEVELOPMENT IN EARLY 2020 OF A NEW GRANT OPPORTUNITY TO HELP STATE M EDICAL BOARDS AND OTHER HEALTH CARE ORGANIZATIONS STUDY STATE RESPONSES TO THE COVID-19 PA NDEMIC. THE LONG-TERM GOAL OF THE PROGRAM IS TO ENCOURAGE THE DEVELOPMENT OF SUSTAINABLE M ODELS AND POLICIES TO HELP STATES PREPARE FOR AND RESPOND TO SIMILAR EMERGENCIES IN THE FU TURE, AS WELL AS STRENGTHEN THEIR CAPACITY FOR RECOVERY PLANNING.

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990 Schedule O, Supplemental Information

Return Reference	Explanation						
FORM 990, PART VI, SECTION A, LINE 7A	THE FOUNDATION BOARD SHALL CONSIST OF UP TO FIFTEEN (15) DIRECTORS (THE "DIRECTORS"), MINI MINI OF THREE (3) OF WHOM SHALL BE ELECTED FOR THREE (3) YEAR TERMS FROM AMONG THE FELLOWS OR HONORARY FELLOWS OF THE FSMB; ONE (1) OF WHOM SHALL BE THE CHIEF EXECUTIVE OFFICER OF THE FEDERATION OF STATE MEDICAL BOARDS (THE YSMB). ONE (1) OF WHOM SHALL BE THE CURRED FOR THE FEDERATION OF STATE MEDICAL BOARDS (THE YSMB). ONE (1) OF WHOM SHALL BE THE CURRED FOR THE FEDERATION OF STATE MEDICAL BOARDS (THE YSMB). ONE (1) OF WHOM SHALL BE THE CURRED FOR THE YSMB). ONE (1) OF WHOM SHALL BE THE CURRED FOR CONTINUE OF THE YSMB CO						

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Return eference	Explanation
RM 990, RT VI, CTION B	THE FORM 990 IS REVIEWED BY THE TREASURER, THEN A COPY OF THE FORM 990 IS PROVIDED TO AND REVIEWED BY THE BOARD OF DIRECTORS BEFORE THE FORM 990 IS FILED WITH THE IRS.

MK0058

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990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE FOUNDATION'S CONFLICT OF INTEREST POLICY AND ITS CERTIFICATION IS DISTRIBUTED TO AND R EVIEWED ANNUALLY BY DIRECTORS, OFFICERS, COMMITTEE MEMBERS AND EXECUTIVE MANAGERS, EACH OF WHOM HAS A CONTINUING RESPONSIBILITY TO EVALUATE THEIR TRANSACTIONS, OUTSIDE BUSINESS INT ERESTS AND RELATIONSHIPS FOR POTENTIAL CONFLICTS OF INTEREST, AND TO MAKE SUCH DISCLOSURES AS DESCRIBED IN THE POLICY. THE FOUNDATION BOARD SHALL ANNUALLY REVIEW THE CONFLICT OF IN TEREST CERTIFICATIONS. THE DISCLOSURES CONTAINED THEREIN SHALL BE DEEMED APPROVED BY THE B OARD UNLESS AN OBJECTION IS MADE BY ONE OR MORE DIRECTORS. SUCH APPROVAL OR OBJECTION IS D OCUMENTED IN THE MINUTES OF THE BOARD MEETING. WHENEVER ANY INDIVIDUAL SUBJECT TO THIS POL ICY BELIEVES HE OR SHE MAY HAVE A CONFLICT OF INTEREST, HE OR SHE SHALL RROMPITLY NOTIFY THE BOARD PRESIDENT OR APPROPRIATE COMMITTEE CHAIR OF SUCH CONFLICT. WHEN ANY CONFLICT OF IN TEREST IS RELEVANT TO A MATTER THAT COMES UNDER CONSIDERATION OR REQUIRES ACTION BY THE FOUNDATION BOARD OR A COMMITTEE, THE DIRECTOR/OFFICER/COMMITTEE MEMBER SHALL CALL IT TO THE ATTENTION OF THE BOARD PRESIDENT OR APPROPRIATE COMMITTEE, THE INTERESTED PARTY SHALL RECUSE HIMSELF OR HERSELF FOR THE DISCUSSION OF, AND THE VOTE ON, THE MATTER. THE INTERESTED PARTY SHALL BE COUNTED FOR PURPOSES OF A QUORUM BUT SHALL LEAVE THE MEETING BEFORE DECISIONS ARE MADE ON MATTERS FOR HEAD SUCH AN INTEREST. THE MINUTES OF THE MEETING OF THE BOARD OR COMMITTEE. THE MINUTES OF THE MEETING OF THE BOARD OR COMMITTEE. THE MINUTES OF THE MEETING OF THE BOARD OR COMMITTEE. THE MINUTES OF THE MEETING OF THAT THE HORDE.

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990 Schedule O. Supplemental Information

turn rence	Explanation
1990, VI, KON C,	THE FOUNDATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL S TATEMENTS AVAILABLE TO THE PUBLIC ON THE WEBSITE AND UPON REQUEST.

MK0060

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493111015071 OMB No. 1545-0047 **SCHEDULE R Related Organizations and Unrelated Partnerships** (Form 990) ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information. **Open to Public** Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** FEDERATION OF STATE MEDICAL BOARDS RESEARCH & EDUCATION FOUNDATION 36-3071272 Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I (a)
Name, address, and EIN (if applicable) of disregarded entity (f) Direct controlling (c) Legal domicile (state (e) Total income End-of-year assets Primary activity or foreign country) entity Part II Identification of Related Tax-Exempt Organizations, Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (f) Direct controlling (g) Section 512(b) (c) (d) (e) Name, address, and EIN of related organization Legal domicile (state Exempt Code section Public charity status Primary activity or foreign country) (if section 501(c)(3)) entity (13) controlled entity? Yes No (1)THE FEDERATION OF STATE MEDICAL BOARDS OF THE UNITED STATES PROMOTING EXCELLENCE NE 501(C)(6) N/A No 400 FULLER WISER ROAD IN MEDICAL PRACTICE, LICENSURE, AND N/A EULESS, TX 76039 REGULATION 75-1092490

Schedule R (Form 990) 2019

(a)		(b)	(c)	(d)	(e)	(f)	(g)	(H	1)	(i) Code V-UBI	6	i)	(k)	
Name, address, and EIN related organization	of	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Predominant income(related unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	Disprop alloca	rtionate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene	ral or aging	Percentag ownership	
					514)			Yes	No		Yes	No		
														_
														_
														_
		_												
IV Identification of Related Orga because it had one or more relate						nization ans	wered "Ye	s" on F	orm 9	990, Part IV	, line	34		
(a) Name, address, and EIN of related organization	(b) Primary activity	do (state	(c) egal micile or foreign	Direc	entity (C c	(e) be of entity orp, S corp, or trust)	(f) Share of total income		(g) of end- year assets	-of- Perce owne	ntage	L	(i) ection 512(3) controlle entity?	
		COL	intry)									1	res No	_
													+	_
														_

Schedule R (Form 990) 2019

-6	Transactions with Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		No
b	Gift, grant, or capital contribution to related organization(s)	1 b		No
С	Gift, grant, or capital contribution from related organization(s)	1c		No
d	Loans or loan guarantees to or for related organization(s)	1 d		No
е	Loans or loan guarantees by related organization(s)	1e		No
				
f	Dividends from related organization(s)	1f		No
g	Sale of assets to related organization(s)	1 g		No
h	Purchase of assets from related organization(s)	1h		No
i	Exchange of assets with related organization(s)	1 i		No
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		No
	Performance of services or membership or fundraising solicitations for related organization(s)	11		No
	Performance of services or membership or fundraising solicitations by related organization(s)	1m	Yes	
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		_
		10	Yes	
0	Sharing of paid employees with related organization(s)	10	165	
р	Reimbursement paid to related organization(s) for expenses	1 p	Yes	
q	Reimbursement paid by related organization(s) for expenses	1 q		No
r	Other transfer of cash or property to related organization(s)	1r		No
s	Other transfer of cash or property from related organization(s)	1s		No
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.			
	(a) (b) (c) (d)			
	Name of related organization Transaction type (a-s) Amount involved Method of determining an	nount i	nvolved	i

Schedule R (Form 990) 2019

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	0	section	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	te	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General managin partner	or ig ?	(k) Percentage ownership
		514)	Yes	No			Yes	No		Yes	No	
	(b) Primary activity	Primary activity Legal domicile (state or foreign	domicile income (state or (related, foreign unrelated, country) excluded from	domicile income (state or foreign country) tax under sections 512-	domicile income section (related, organizations? excluded from tax under sections 512-	domicile income section total (state or (related, organizations? excluded from tax under sections 512-	domicile income (related, foreign country) tax under section total end-of-year foreign country) tax under sections 501(c)(3) income assets organizations? tax under sections 512-	domicile income section total end-of-year allocations? (related, foreign country) excluded from tax under sections 512-	domicile income section total end-of-year allocations? (state or (related, foreign country) excluded from tax under sections 512-	domicile income section total end-of-year allocations? amount in box (state or foreign country) excluded from tax under sections 512-	domicile income (state or (related, unrelated, country) excluded from tax under sections 512-	domicile income section total end-of-year allocations? amount in box managing foreign unrelated, country) excluded from tax under sections 512-

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12/5/22, 7:04 PM

GRANT to FEDERATION OF STATE MEDICAL BOARDS OF THE UNITED STATES, INCORPORATED, THE | USAspending

EXHIBIT

D

USAspending.gov | Fiscal Data
An official website of the U.S. government



AWARD PROFILE

Grant Summary



Project Grant



FAIN H7F37568

Completed

Includes COVID-19 Spending

Awarding Agency

Department of Health and Human Services (HHS)

Recipient

FEDERATION OF STATE MEDICAL BOARDS OF THE UNITED STATES, INCORPORATED, THE

400 FULLER WISER RD EULESS, TX 76039-3857 Congressional District: TX-24 UNITED STATES

Assistance Listings (CFDA Programs) 🕕

93.211 - TELEHEALTH PROGRAMS
VIEW MORE INFO ABOUT THIS PROGRAM

Start Date

May 01, 2020

12/5/22, 7:04 PM

GRANT to FEDERATION OF STATE MEDICAL BOARDS OF THE UNITED STATES, INCORPORATED, THE | USAspending

Apr 30, 2022 End Date \$ Award Amounts • Description • Overall Spending COVID-19 Spending CORONAVIRUS LICENSURE PORTABILITY GRANT PROGRAM **Outlayed Amount** \$2,493,428.94 **Obligated Amount** \$2,500,000.00 O Non-Federal Funding \$0.00

Total Funding

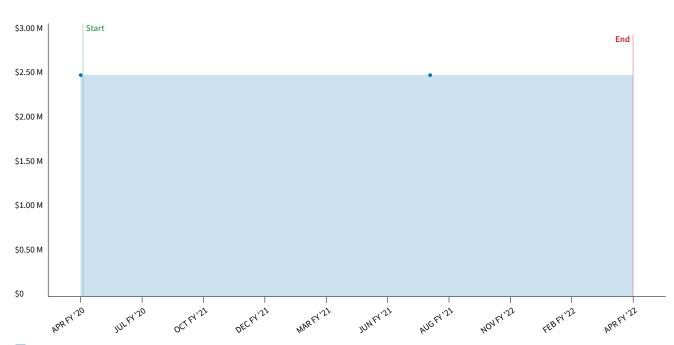
12/5/22, 7:04 PM

GRANT to FEDERATION OF STATE MEDICAL BOARDS OF THE UNITED STATES, INCORPORATED, THE | USAspending

\$2,500,000.00

View Transaction History





■ View transactions table

Federal Accounts

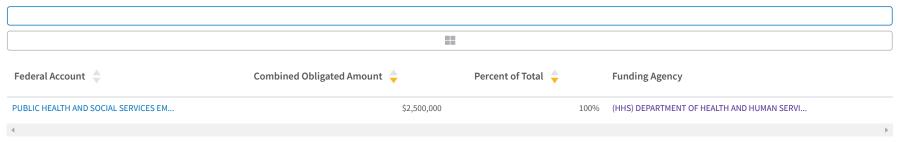
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NOTE: Result count may differ between treemap view and table view. Treemap view only displays accounts with a positive combined obligated amount, while table view displays all accounts.

Summary of All Federal Accounts used by this Award

Total Funding Obligated	\$2,500,000.00
Total Count of Funding Agencies	1
Total Count of Awarding Agencies	1
Total Count of Federal Accounts	1

■ View federal funding submissions

Assistance Listing (CFDA Program) Information

93.211: TELEHEALTH PROGRAMS

Objectives

The purpose of the Telehealth Network Program (TNGP) is to fund programs that demonstrate how telehealth networks improve healthcare services in rural communities. The current cohort is aimed towards promoting ...

read more

Administrative Agency

HEALTH RESOURCES AND SERVICES ADMINISTRATION, HEALTH AND HUMAN SERVICES, DEPARTMENT OF

0

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Website

https://www.hrsa.gov/ruralhealth/telehealth/index.html

SAM.gov Page

https://sam.gov/fal/8557208a7c3940c89580656c3ac18978/view

SHOW MORE

Award History

Transaction History ~

Modification Number 💠	Assistance Listing \clubsuit	Action Date 🔷	Amount 🔷	Action Type 🔷	Tran
00	93.211	04/28/2020	\$2,500,000	A: New	cc
01	93.211	08/04/2021	\$0	B: Continuation	CC 🕶
4					•

i Additional Information

Expand All

M Unique Award Key

0

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12/5/22, 7:04 PM	GRANT to FEDERATION OF STATE MEDICAL BOARDS OF THE UNITED STATES, INCORPORATED, THE USAspending	
Agency Details		>
Place Of Performance		>
Period Of Performance		>
Recipient Details		>
Executive Compensation		>

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EXHIBIT

E





AWARD PROFILE

Grant Summary



Project Grant



FAIN H1M24097

In Progress

(1 year, 6 months remain)

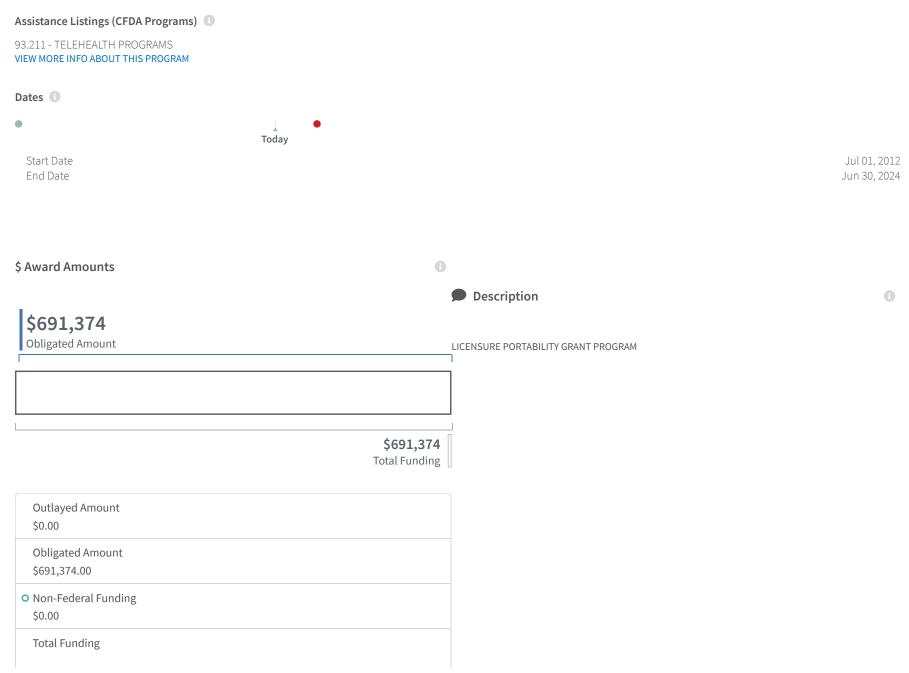
Awarding Agency

Department of Health and Human Services (HHS)

Recipient

FEDERATION OF STATE MEDICAL BOARDS OF THE UNITED STATES, INCORPORATED, THE

400 FULLER WISER RD EULESS, TX 76039-3857 Congressional District: TX-24 UNITED STATES



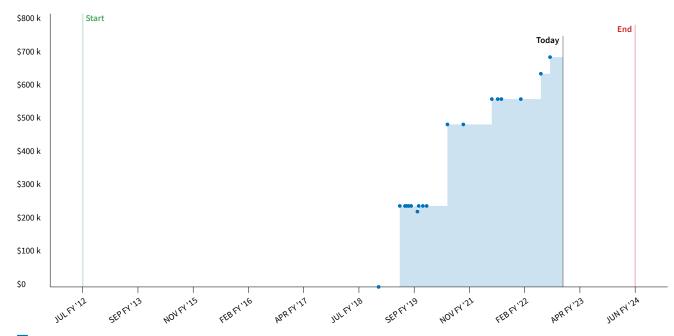
12/5/22, 7:05 PM

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\$691,374.00

■ View Transaction History





■ View transactions table

Federal Accounts

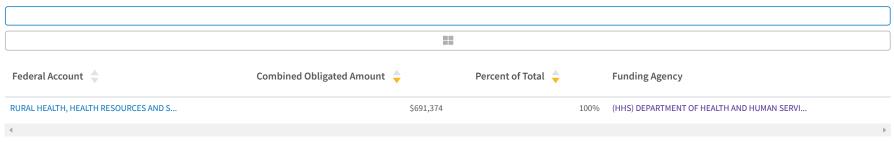
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NOTE: Result count may differ between treemap view and table view. Treemap view only displays accounts with a positive combined obligated amount, while table view displays all accounts.

Summary of All Federal Accounts used by this Award

Total Funding Obligated	\$691,374.36
Total Count of Funding Agencies	1
Total Count of Awarding Agencies	1
Total Count of Federal Accounts	1

■ View federal funding submissions

Assistance Listing (CFDA Program) Information

93.211: TELEHEALTH PROGRAMS

Objectives

The purpose of the Telehealth Network Program (TNGP) is to fund programs that demonstrate how telehealth networks improve healthcare services in rural communities. The current cohort is aimed towards promoting ...

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Administrative Agency

HEALTH RESOURCES AND SERVICES ADMINISTRATION, HEALTH AND HUMAN SERVICES, DEPARTMENT OF

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Website

https://www.hrsa.gov/ruralhealth/telehealth/index.html

SAM.gov Page

https://sam.gov/fal/8557208a7c3940c89580656c3ac18978/view

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Transaction History ~

Modification Number 🔷	Assistance Listing 🔷	Action Date 🔷	Amount 🔷	Action Type 🔷	Tran
00	93.211	05/20/2021	\$76,250	B: Continuation	LIC
00	93.211	06/02/2020	\$245,250	B: Continuation	LIC
00	93.211	06/13/2022	\$76,250	B: Continuation	LIC
00	93.211	05/21/2019	\$243,625	B: Continuation	LIC
01	93.211	10/06/2020	\$0	C: Revision	LIC
01	93.211	07/01/2019	\$0	C: Revision	LIC
01	93.211	08/25/2022	\$50,000	C: Revision	LIC
01	93.211	07/06/2021	\$0	C: Revision	LIC
02	93.211	08/04/2021	\$0	C: Revision	LIC
02	93.211	07/15/2019	\$0	C: Revision	LI(

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₫ 03	93,211	01/05/2022	\$0	C: Revision	PICENSURE PORTABILITY GRANT PROGRAM
03	93.211	07/30/2019	\$0	C: Revision	LICENSURE PORTABILITY GRANT PROGRAM
04	93.211	12/04/2018	\$0	C: Revision	LICENSURE PORTABILITY GRANT PROGRAM

Additional Information

Expand All

⋒ Unique Award Key	>
Agency Details	>
Place Of Performance	>
Period Of Performance	>
Recipient Details	>
Executive Compensation	>

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NATIONAL BOARD OF MEDICAL EXAMINERS

PHILADELPHIA, PA 19104-3102 | TAX-EXEMPT SINCE SEPT. 1937

EIN: 23-1352238

Classification (NTEE)

Professional Societies, Associations (Health — General and Rehabilitative)

Nonprofit Tax Code Designation: 501(c)(3)

Defined as: Organizations for any of the following purposes: religious, educational, charitable, scientific, literary, testing for public safety, fostering national or international amateur sports competition (as long as it doesn't provide athletic facilities or equipment), or the prevention of cruelty to children or animals.

Donations to this organization are tax deductible.

More Resources:

■ GuideStar

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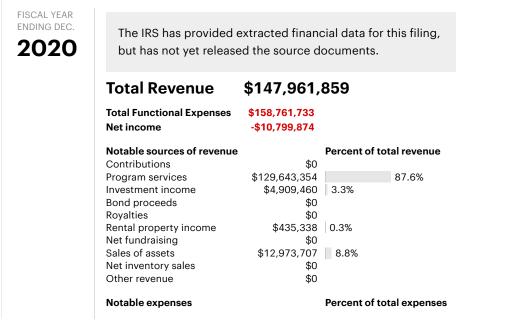
Tax Filings by Year

The IRS Form 990 is an annual information return that most organizations claiming federal tax-exempt status must file yearly. Read the IRS instructions for 990 forms.

If this organization has filed an amended return, it may not be reflected in the data below. Duplicated download links may be due to resubmissions or amendments to an organization's original return.



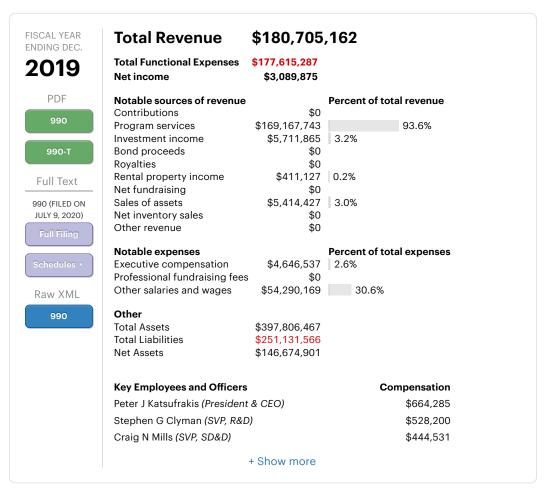
The Internal Revenue Service is substantially delayed in processing and releasing nonprofit filings, so documents available here may not be the most recent an organization has filed. ProPublica posts new tax forms as they are released by the IRS.

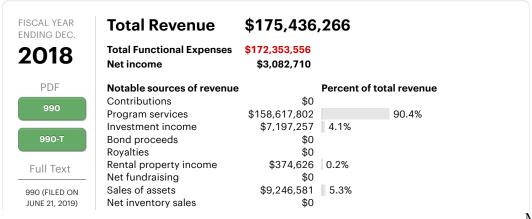


Total Revenue	\$147,961,	359
Total Functional Expenses Net income Executive compensation Professional fundraising fees	\$158,761,733 - \$10,799,874 \$4,487,205 \$0	2.8%
Other salaries and wages	\$54,869,463	34.6%
Other		
Total Assets	\$396,621,143	
Total Liabilities	\$231,284,700	
Net Assets	\$165,336,443	

Help Keep Nonprofit Explorer Free!

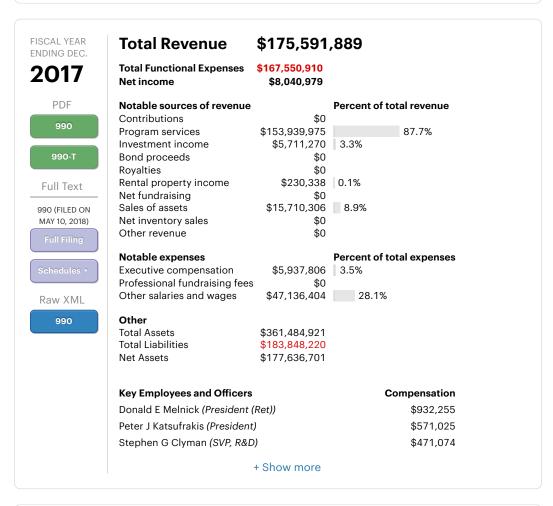
If you have used our data or site in your research or reporting, add credit and a link to Nonprofit Explorer in your story or publication and let us know.





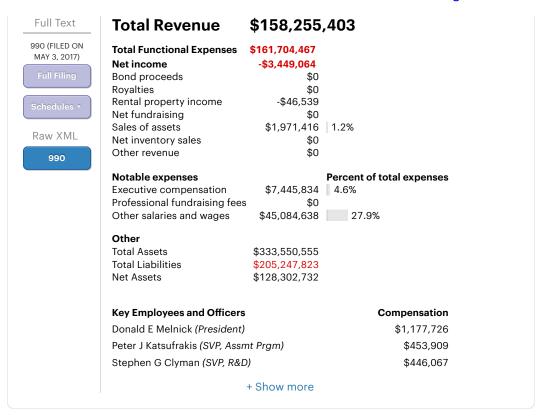
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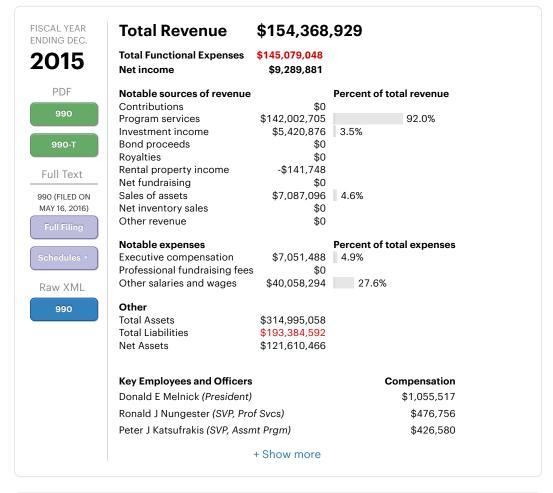




FISCAL YEAR ENDING DEC.	Total Revenue	\$158,255	,403	
2016	Total Functional Expenses Net income	\$161,704,467 -\$3,449,064		
PDF	Notable sources of revenue		Percent of tota	l revenue
990-T	Contributions	\$0		
990-1	Program services	\$151,101,701		95.5%
	Investment income	\$5,228,825	3.3%	

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FISCAL YEAR ENDING DEC.





February 8, 2022

Markcus Zwanz Kitchens 625 Hampton Way #2 Richmond, KY 40475

RE: USMLE Step 1 USMLE ID#: 1-077-051-9

Dear Markcus Zwanz Kitchens:

We have thoroughly reviewed the documentation you provided in support of your request for test accommodations on the United States Medical Licensing Examination (USMLE) Step 1.

Accommodations are intended to ensure that individuals with a documented disability as defined by the Americans with Disabilities Act (ADA) can take the USMLE exams in an accessible place and manner. A diagnostic label, in and of itself, does not establish coverage under the ADA, nor does prior receipt of accommodations for a particular activity guarantee that identical accommodations are indicated or will be available in all future settings and circumstances. The ADA defines disability as a physical or mental impairment that substantially limits a person's ability to perform one or more major life activities, as compared to most people in the general population. Therefore, not every impairment will constitute a disability.

We conducted an individualized review of your request in accordance with the guidelines set forth in the ADA. Specifically, one or more doctoral-level psychological or medical professionals:

- Carefully considered all of the information you provided, including the recommendations of your treating and/or evaluating professional(s)
- Gave substantial weight to your history of accommodations on standardized examinations
- Considered whether and how your reported impairment(s) affects your ability to access a computer-based examination like the USMLE

Based upon this review, we have concluded that you have not shown that your requested accommodations are necessary for you to access the USMLE. Accordingly, your request is being denied, for the following primary reasons:

Your treatment professionals did not provide sufficient information regarding the basis for the diagnosis of Attention-Deficit/Hyperactivity Disorder (ADHD). Even if not formally diagnosed in childhood, the essential feature of ADHD, a neurodevelopmental disorder, is a persistent pattern of inattention and/or hyperactivity-impulsivity that interferes with functioning or development. According to the *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5)*, manifestation of the disorder must be present in more than one setting (e.g., home and school, work). Adult self-report and recall is not sufficient to substantiate a history of substantial symptoms across settings. Your documentation does not objectively demonstrate that you have shown pervasive problems managing daily demands for attention, concentration, or organization in school, work, social, or other domains.

- While we noted your 2018 diagnosis of Test Anxiety, experiencing anxiety during highstakes examinations is not, in and of itself, evidence of a disability or impairment in a major life activity.
- Your documentation reveals a history of not being substantially limited in your ability to
 perform the functions that are relevant to taking a standardized test like the USMLE. As
 best one can tell, you progressed throughout your education with an academic record
 and scores on timed standardized tests sufficient to gain admission to and graduate from
 university and medical school, all without formal accommodations.

We hope this information assists you in understanding the basis for our decision. We will request processing of your exam application without test accommodations. You may inquire at permits@ecfmg.org or call Applicant Information Services at (215) 386-5900 with any questions about your scheduling permit.

Please monitor the USMLE announcements page at <u>www.usmle.org</u> and the Prometric website at <u>www.prometric.com/corona-virus-update</u> for up-to-date information regarding the impact of the coronavirus (COVID-19) pandemic on USMLE testing.

Sincerely, Disability Services

Highly Confidential 2